CITY OF MANCHESTER.

REPORT

ON THE

Health of the City of Manchester,

1923-1924,

BY

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MANCHESTER:
Henry Blacklock & Co. Limited, Albert Square.

(2632)

PUBLIC HEALTH OFFICE,
CIVIC BUILDINGS,
1, MOUNT STREET, MANCHESTER,
25th November, 1925.

MY LORD MAYOR, ALDERMEN,
AND MEMBERS OF THE CITY COUNCIL.

I beg to submit my report on the health of the City of Manchester during the two years 1923 and 1924.

The following is a general review of the facts contained in the report :—

Birth Rate.

The birth rate, which was 20·5 for the year 1923 and 19·2 for 1924, continues to show, if we exclude the war years, a steady decline.

Marriage Rate.

In 1923 this reached the lowest level yet recorded, viz., 14·5 ; in 1924 it was 16·6.

Death Rate.

A death rate of 13·3 recorded in 1923 is, with the exception of the year 1920, the lowest reached in Manchester. In 1924 the rate advanced slightly to 14·0.

In the special death rates the general trend in recent years has been maintained as a whole, and may be seen in Tables E and F. In the death rates that are not falling special attention may be directed to deaths from diseases of the heart and blood vessels, from cancer, and from causes associated with child-birth. In the blood vessels diseases group the rate has risen from 0·7 in 1917 to 1·2 in 1924. The death rate from cancer was at the highest point in 1923 (1·39), and only slightly lower (1·37) in 1924. Reference is made subsequently to the establishment of a special Manchester Committee on Cancer. The third special death rate to which particular attention is directed is the maternal death rate. In 1923 this was 3·39 per thousand births, and in 1924 4·29. In the ten years 1911-20 the average was 3·39.

Infant Mortality.

The infant mortality rate in 1923 was 88·19, and in 1924 100·13. The first figure is the lowest on record in Manchester. The rise to 100 per thousand in 1924 accompanied a general rise in infant mortality throughout the country, and of the specific causes the following increased rates in 1924 over 1923 are prominent :—

Measles	3·86	per 1,000.
Premature Death	2·35	,,
Bronchitis	1·92	,,
Atrophy	1·53	,,
Diarrhœa	1·29	,,
Congenital Defects	1·63	,,
Injury at Birth	1·15	,,
Convulsions	0·91	,, .

One may generally state, therefore, that the increase is due mainly to measle and the deaths arising from pre-natal causes. Measles is referred to subsequently, but it is important to observe here that the ante-natal causes o infant mortality demand close investigation and more provision for control.

Infant mortality amongst legitimate children was 85 per 1,000 in 192 and 96 in 1924; amongst illegitimate children 158 per 1,000 in 1923 an 195 in 1924.

Infectious Diseases.

It is very satisfactory to note that the City remained free from smallpo during the two years under review, in spite of the prevalence of that diseas throughout the country. More particularly is this so since outbreaks occurre in the immediate vicinity. A close watch was kept on all suspected case and throughout these years chickenpox, owing to its close similarity to smallpo has been notifiable; this is a very valuable preventive measure, and shoul be maintained until the country is free, or practically free, of smallpox.

Scarlet Fever in both years continued to show the decline which ha been characteristic of this disease since 1921. The fatality of the disease wa slightly lower than the average of the last ten years.

The incidence of *Diphtheria* was slightly below the average of the last te years. The death rate was slightly lower than the immediately precedin years. It is satisfactory to note that the use of anti-toxin in the early stage of the disease is increasing.

The returns of *Enteric Fever* shows increase in the number of cases in 192 This is not an increase of the true typhoid, but is mainly due to the inclusio of 49 cases of paratyphoid fever, a much milder disease. The number of case of true typhoid is below the average.

Measles.—Measles was present in epidemic form in 1924. In 1923 the case numbered 3,481 and in 1924 18,349; the death-rate in 1924 was more tha four times that of 1923. Since 1920 there has been an alternation in successiv years in the number of cases. This disease is one of the serious and mos killing diseases in infancy and early childhood, and its effects are to be measure not only in the actual fatality at the time of its occurrence, but in the undoubte physical enfeeblement which it produces in the individual at a period of lif when growth is most rapid and adverse influences produce the most seriou results upon development and subsequent efficiency in adult life. It is on of the most difficult diseases to handle in the epidemiological sense, and present a problem which will demand most careful consideration at an early date fro the Public Health Authority.

Encephalitis Lethargica—commonly known as "Sleepy Sickness"—was unusually heavy in 1924, 244 cases being notified. The deaths numbered 52. A special report is presented by Dr. McClure on this disease. The severity of the condition is manifest not only in its very high mortality (approximately 20 per cent.), but in the very grave degenerative changes which occur, especially amongst the young, who have suffered from this disease. These changes more especially take the form of all sorts of mental deficiency, in some instances causing permanent incapacitation, and even imbecility, in the individual.

Puerperal Fever shows no signs of diminution in its incidence upon the City. The mortality from this disease remains also unchanged except in one important respect; this has occurred in the cases treated in Monsall Hospital, where from the beginning of the last quarter of 1924 a special piece of work has been carried out in conjunction with the Medical Research Council, London, whereby newly-developed methods of treatment have been employed. The work is still proceeding, and a full report of the results of this treatment will be available at an early date. The first six months' treatment, however, ending the first quarter of 1925, has shown a reduction in case mortality from an average of 21 or 22 per cent. to just over 13. The stay in hospital has also been lessened from an average of 39 to 25·9 days, and it is noteworthy that the necessity for active surgical operation has almost been eliminated. There is no more important work at present being carried out in the Department than this, and the evidence to hand of the year's working indicate that this measure of success will be maintained if not improved upon.

Cases of *Ophthalmia Neonatorum*—inflammation of the eyes of the newly-born—numbered 836 in 1923 and 853 in 1924. This is approximately the average incidence. It is very gratifying, however, to note that the disease is having much less serious results upon the sight of the child, and loss of sight or damage to the eyes is now very unusual. This is undoubtedly due to the very close supervision maintained by the Department and to the effective co-operation of the midwives in the early notification of the disease.

Two important developments were initiated during the summer of 1924, viz., the formation of a Local Cancer Committee and the formation of the Manchester Regional Joint Smoke Abatement Committee.

Cancer.

The Cancer Committee was formed in accordance with recommendations issued by the Ministry of Health in a memorandum on cancer in 1923. In the first instance it was a provisional Cancer Committee, the members of which were invited by the Medical Officer of Health to meet and discuss the position as regards cancer in the city, and represented at first unofficially the Public

Health Committee, the University of Manchester, Manchester Royal Infirma the Radium Institute Cancer Hospital, and all the other large hospita in the City. A scheme of work was provisionally drawn up, and in order th the committee should have a proper official status the bodies who we represented on the provisional committee were invited to nominate officiall appointed delegates, who should constitute the committee. This was effect finally at the end of the year, and during 1925 the committee has develop a scheme of work and issued an appeal for public support to enable this wo to be carried out.

Smoke.

The Manchester Regional Joint Smoke Abatement Committee was t outcome of an invitation issued by the Ministry of Health to 102 local authoriti in the South-east Lancashire area to meet with the view to forming such committee and discuss the possibility of joint action. By the courtesy the Lord Mayor, the initial meeting, as well as subsequent meetings of t full committee, have been held in the Town Hall. The first meeting wa presided over by Mr. J. C. Dawes, from the Ministry of Health. The recon mendations made by this Regional Committee are of a very extensive charact and are at present under the consideration of both the constituent authoriti and of the committee. Any general statement, therefore, would be prematu but the importance of joint action for the control of the smoke nuisance cann be over-estimated, as the pollution of the atmosphere is one of the grav existing menaces to public health. There is probably no single action possib to local health authorities which would do more to improve the public heal than the abolition of the smoke nuisance.

Milk Supply.

In the control of the milk supply of the City a great increase of work h arisen in consequence, mainly, of Section 2 of the Milk and Dairies (Amendmen Act, 1922. A Special Milk Sub-Committee of the Public Health Committ has been formed, and registration of premises has been proceeded wi assiduously during the past two years. The standard of milk shops unquestionably being improved, and the work made possible under the n Act should notably improve the conditions of milk distribution in the Cit Towards the end of 1924 a joint conference was held by the Public Heal Committee with various Farmers' Unions of Lancashire, Cheshire, and Der shire, the National Clean Milk Society, the Manchester and Salford Milk Deale Association, and the Lancashire Milk Recording Society, and general arrang ments come to whereby the active co-operation and assistance of these bod was assured to the City for the purpose of obtaining greater cleanliness the farms.

In 1924, also, the City held a Clean Milk Demonstration at the Royal Lancashire Agricultural Show. The exhibit excited very great interest, and work of this description should be further developed and encouraged with a view to informing not only the public but those actually concerned in the milk trade of the possibilities of producing a really clean milk under ordinary farm conditions.

Medlock Street Area.

On page 242 of the report is reproduced a summary of evidence given by the Medical Officer of Health at an enquiry held by the Ministry of Health in regard to the Medlock Street insanitary area. The Ministry approved the scheme, and issued a confirming Order in October, 1923. Since that date rehousing of the dispossessed tenants has been proceeding satisfactorily, and, simultaneously, demolition of the vacated houses has been proceeded with.

The general condition of housing in the City remains in a very unsatisfactory state. Repeated investigations and the continuous work of the Department show an excessive degree of overcrowding—large families being huddled together in one, two, or three rooms under circumstances which not only make the ordinary decencies of life all but impossible, but are certain to have a profoundly serious effect on the individual health and welfare of the people.

Abergele Sanatorium.

On page 151 is reproduced a report to the City Council by the Public Health Committee and the Finance Committee on the extension of the Sanatorium at Abergele for the treatment of tuberculosis in children under the age of 15 years. This report was approved by the City Council in December, 1924. During the current year the general approval of the Ministry of Health has been received and the initial stages of the work have been entered upon. The first stage of the work is the provision of 210 beds with the necessary administrative buildings. The complete scheme aims at the provision of 546 beds. The information contained in the reports referred to indicate sufficiently the great need for making such provision.

A very large proportion of tuberculosis in young children is due to infection received from tuberculous milk, and it is evident that whilst the provision made for treatment promises, from our own experience at Abergele, and experience gained in many other places, that a large proportion of cures can be effected, yet the prime necessity facing us is to prevent the introduction of tuberculous milk into the City. The powers which have existed in the past do not in any way effectively enable us to attain this object.

Visits of Foreign Medical Officers.

During each of the years under review Manchester was visited by a group of Medical Officers of Health in connection with the interchange of Medical Officers of Health of various countries organised by the League of Nations

with the help of the Rockefeller Institute. A large number of Medical Office
of Health from all parts of the world came to England during those year
and a programme of work was arranged for them by the Society of Medic
Officers of Health, who were officially acting in this capacity for the Leag
of Nations.

The visitors were divided into groups and sent to various parts of Britai
The two groups who visited Manchester and the adjoining county of Cheshi
spent three weeks here, during which time they saw fully the public healt
work carried on in the City. The greatest interest and appreciation was show
by the visitors, and much valuable information was obtained by the Departme
as to methods and public health practices in other countries.

Propaganda.

The dissemination of information on public health matters to the publ
generally is now acknowledged to be one of the most potent weapons in th
armoury of public health authorities. For some years the Department h
organised and conducted talks and lectures and cinema demonstrations wit
a view to instructing the people as to the dangers and treatment of venere
disease. In addition to this, the various members of the Medical Staff hav
delivered a considerable number of addresses to various bodies in the City o
public health subjects. To attain a real success in the application of preventi
medicine ascertained truths must become, in greater degree than hithert
common knowledge amongst the people. This educative work is recognise
in the 1925 Public Health Act, and will in the coming years constitute a
important development in the work of public health authorities.

Special sections of the report have been written by the officers in charge
the work detailed in those sections, and I gratefully acknowledge the unstint
help which I have throughout received from the members of the staff, bot
in the general work of the department and in the preparation of the repo
now submitted.

May I also, My Lord Mayor, be permitted to express my appreciation
the courtesy and unfailing aid which I have experienced, not only from th
Public Health Committee, but from the members of the City Council.

I have the honour to be,

Your obedient Servant,

R. Veitch Clark,

Medical Officer of Health.

STATISTICAL.

following are general statistics for the years 1923 and 1924 :—

		1923.			1924.	
ea of the City in acres			21,690			
pulation at the Census, 1921			730,307			
pulation at the Census, 1921, adjusted by Registrar-General for Holiday Movement			744,000			
timated population the middle of year	Males Females	355,047 397,053	752,100	Males Females	356,572 398,547	755,119
of persons per acre			35			35
rsons married per 1,000 of population in the Manchester Union			14·48			16·55
rths in the City of Manchester	Males Females	7,871 7,517	15,388	Males Females	7,512 7,179	14,691
nual birth-rate per 1,000 of population			20·46			19·15
aths	Males Females	5,187 4,828	10,015	Males Females	5,583 5,119	10,702
corded annual death-rate per 1,000 of population	Males Females	14·60 12·16	13·32	Males Females	15·42 12·64	13·95
aths under 1 year of age per 1,000 births			88·19			100·13
cess of registered births over deaths			5,373			3,989
rcentage of mortality occurring in public institutions			38·67			37·67
o. of undivided private houses at the Census in June, 1921			143,725			
o. of undivided private houses, tenements, blocks of flats, shops, etc., at the Census in June, 1921			157,704			
o. of persons per undivided private house			4·56			
o. of persons per all dwellings			4·63			
rresponding figures, 1911, ordinary dwelling-houses			4·71			
rresponding figures, 1911, all dwellings			4·86			

TABLE 1.

Annual Death-rates—Male and Female.

Year	Male	Female
1913	17·31	14·35
1914	18·36	15·28
1915	17·62	15·09
1916	15·53	13·68
1917	14·57	12·29
1918	16·34	15·33
1919	14·83	13·13
1920	14·33	11·75
1921	15·32	11·99
1922	15·47	13·18
Average 10 years ..	15·96	13·60
1923	14·60	12·16
1924	15·42	12·64

Proportion of Deaths occurring in the Home, and in Public Institutions. The figures are as follows :—

TABLE 2.

Percentage of all deaths occurring in public institutions since 1915 :—

Year	1915	1916	1917	1918	1919	1920	1921	1922	1923	1924
Percentage	31·8	33·2	34·0	30·6	30·6	33·0	36·4	36·1	36·8	37·7

TABLE 3.

Percentage dying in public institutions in the three main divisions of the City :—

Year	1915	1916	1917	1918	1919	1920	1921	1922	1923	1924
Manchester Township ..	40·7	44·8	46·6	39·8	41·5	44·6	44·8	46·5	50·1	52·1
North Manchester	24·0	26·2	27·1	24·2	25·2	25·9	31·9	29·2	31·5	32·1
South Manchester	31·4	31·5	32·1	29·3	29·7	32·1	35·5	35·3	34·4	35·0

CITY OF MANCHESTER (299, OLDHAM ROAD)—METEOROLOGY, 1923. (Means of the Monthly Readings.)

	Barometer	Dry Bulb	Wet Bulb	Humidity	Maximum Temperature	Minimum Temperature	Mean Temperature in Shade	Sun Maximum	Grass Minimum	One Foot	Four Feet	Total Rainfall (inches)	Total No. of Wet Days	Total Hours of Sunshine	Average Mean Daily Temperature 1881-1915 (extracted from book of normals)	Average Rainfall 1892-1922	Average Hours of Sunshine 1892-1922	Fog Noted
January	30·138	43·3	41·8	89	46·5	39·9	43·2	51·6	41·1	40·7	43·5	2·97	26	9·3	39·1	2·99	11·41	12th
February	29·524	41·6	39·7	85	45·7	38·8	42·2	55·2	36·8	41·0	44·2	4·56	26	21·8	40·1	2·48	32·54	
March	30·055	43·9	41·5	82	50·7	40·2	45·5	69·3	37·3	42·0	43·6	1·69	12	79·0	42·3	2·62	77·90	
April	29·774	45·7	42·1	75	52·7	40·3	46·5	78·9	37·9	45·4	46·6	3·24	13	123·3	46·8	2·01	124·06	
May	29·914	47·5	44·1	77	54·5	42·7	48·6	90·9	39·5	49·8	49·3	2·94	19	133·5	52·6	2·44	154·31	
June	30·145	53·4	50·5	82	60·3	49·8	55·0	96·9	47·5	54·9	52·2	0·69	14	118·4	58·4	2·42	161·31	
July	29·972	63·1	60·0	83	70·5	57·9	64·2	104·8	55·5	63·7	58·1	4·58	20	143·1	60·8	3·05	149·32	
August	29·890	58·2	54·8	79	65·3	53·7	59·5	102·8	48·9	60·9	60·2	3·89	23	123·0	59·9	3·67	123·41	
September	29·923	53·5	51·3	86	60·6	49·8	55·2	94·8	44·8	55·1	57·0	3·53	22	111·2	56·4	2·64	104·50	
October	29·634	49·6	47·5	86	54·1	45·3	49·7	75·8	41·5	50·1	53·7	4·06	26	54·4	49·8	3·42	58·52	
November	29·763	38·3	36·8	87	43·1	35·5	39·3	53·2	30·6	40·5	48·3	5·06	19	16·1	43·6	2·73	18·79	5th, 10th, 30th
December	29·954	39·6	38·5	90	43·4	35·8	39·7	48·4	33·8	37·3	42·8	4·05	23	7·9	40·4	3·79	6·84	6th, 9th, 13th
YEAR	29·890	48·1	45·7	83	53·9	44·1	49·0	76·9	41·3	48·4	49·9	41·26	243	941·0	49·2	34·26	1022·91	

City of Manchester (299, Oldham Road)—Meteorology, 1924. (Means of the Monthly Readings.)

	Barometer	Dry Bulb	Wet Bulb	Humidity	Maximum Temperature	Minimum Temperature	Mean Temperature in Shade	Sun Maximum	Grass Minimum	One Foot	Four Feet	Total Rainfall (inches)	Total No. of Wet Days	Total Hours of Sunshine	Average Mean Daily Temperature 1881-1915 (extracted from book of normals)	Average Rainfall 1892-1923	Average Hours of Sunshine 1892-1923	Fog Noted
January	29·939	41·1	39·7	89	44·7	37·4	41·1	50·4	35·6	38·7	41·5	2·81	21	7·8	39·1	2·99	11·35	3rd, 24th
February	30·073	37·9	37·9	86	42·2	35·1	38·7	52·8	34·1	38·3	42·5	1·04	14	19·5	40·1	2·55	31·88	20th, 21st
March	29·885	38·8	38·8	79	47·4	34·4	40·9	67·9	33·2	36·9	40·5	1·32	7	114·0	42·3	2·59	77·93	3rd, 18th
April	29·878	43·8	41·3	82	51·0	38·7	44·9	80·8	37·2	42·1	42·6	1·53	17	88·8	46·8	2·11	124·03	
May	29·841	52·2	49·1	81	59·6	47·4	53·5	94·3	45·4	51·0	47·8	5·53	27	107·3	52·6	2·45	153·64	
June	29·987	57·1	52·8	76	64·6	51·6	58·1	103·8	47·1	58·2	53·9	2·73	22	134·5	58·4	2·37	159·97	
July	29·863	60·1	55·7	75	66·3	54·7	60·5	104·5	49·7	59·3	57·8	3·26	22	134·5	60·8	3·10	149·12	
August	29·838	56·6	54·0	84	63·1	52·7	57·9	97·0	49·1	58·9	58·6	4·89	24	77·8	59·9	3·68	123·40	
September	29·757	56·6	53·1	79	61·5	51·9	56·7	91·6	48·0	56·4	57·2	2·75	23	86·0	56·4	2·67	104·71	
October	29·899	51·1	48·3	81	55·4	46·5	51·0	76·7	40·8	50·5	53·9	4·64	17	64·3	49·8	3·41	58·39	
November	30·049	45·3	43·3	84	49·2	41·7	45·5	59·3	37·7	44·7	49·5	1·54	13	9·4	43·6	2·80	18·71	5th, 6th, 17th, 18th, 19th
December	29·599	45·9	44·2	88	48·9	43·2	46·1	55·5	39·4	44·1	47·3	4·21	21	7·8	40·4	3·80	6·87	16th
Year	29·884	48·9	46·5	82	54·5	44·6	49·6	77·9	41·4	48·3	49·4	36·25	228	851·7	49·2	34·52	1020·00	

The extent to which Poor Law and Voluntary Hospitals are used is to some extent represented in the following table :—

TABLE 4.

1923.—DEATH-RATES* IN THE HOMES OF THE PEOPLE, IN WORKHOUSES, AND IN HOSPITALS FOR THE VARIOUS DIVISIONS OF THE CITY.

STATISTICAL DIVISIONS	Estimated Populations to middle of 1923	Death-rate per 1000 of persons dying in their own homes	Death-rate per 1000 of persons dying in Workhouses	Death-rate per 1000 of persons dying in Hospitals	Total death-rate per 1000	Mean death-rate 1913–1922
City of Manchester. ...	**752,100**	**8·42**	**2·90**	**2·00**	**13·32**	**14·72**
I. Manchester Township.	109,223	8·96	6·39	2·64	17·99	22·28
II. North Manchester	207,213	8·20	1·86	1·92	11·98	12·64
III. South Manchester	435,664	8·38	2·51	1·89	12·78	13·90

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* In this table, *every death* occurring in a Public Institution has been referred to the District from which the patient originally came.

TABLE 4.

1924.—DEATH-RATES* IN THE HOMES OF THE PEOPLE, IN WORKHOUSES, AND IN HOSPITALS FOR THE VARIOUS DIVISIONS OF THE CITY.

STATISTICAL DIVISIONS	Estimated Populations to middle of 1924	Death-rate per 1000 of persons dying in their own homes	Death-rate per 1000 of persons dying in Workhouses	Death-rate per 1000 of persons dying in Hospitals	Total death-rate per 1000	Mean death-rate 1914–1923
City of Manchester ...	**755,119**	**8·70**	**3·32**	**1·93**	**13·95**	**14·47**
I. Manchester Township.	108,558	9·09	7·25	2·70	19·04	21·89
II. North Manchester ..	208,020	8·40	2·14	1·83	12·37	12·47
III. South Manchester ..	438,541	8·76	2·29	1·78	13·44	13·71

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* In this table, *every death* occurring in a Public Institution has been referred to the District from which the patient originally came.

The chief causes of death are shown below for each of the years 1919–1924 :—

TABLE 5.

	1919	1920	1921	1922	1923	1924
Tuberculosis of the Lungs	951	868	967	947	931	906
Tuberculosis of Organs other than the Lungs	237	220	252	242	221	229
Diseases of the Heart	1050	1076	1052	1087	1085	1123
Cerebral Hæmorrhage, Apoplexy, Hemiplegia...............	483	462	422	439	458	473
Pneumonia	977	919	924	1024	974	1023
Bronchitis	1277	1193	1067	1277	1091	1234
Digestive Organs	397	373	382	310	391	339
Atrophy, Debility (chiefly in infants)	144	245	140	114	86	105
Old Age	464	408	405	467	421	353
Premature Birth......................	324	378	333	310	277	299
Nephritis and Bright's Disease	275	283	260	289	243	273
Convulsions.....	56	61	82	53	63	81
Inflammation of the Brain	65	65	59	51	52	43
Diarrhœa and Dysentery.........	172	250	387	191	202	212
Measles	104	210	5	354	83	370
Scarlet Fever	26	46	59	62	31	32
Whooping Cough	40	84	169	99	184	116
Diphtheria	41	67	90	82	47	62
Influenza................................	1127	229	207	393	281	342
Malignant Disease............... ..	875	936	939	955	1049	1050

The following figures show the gains and losses in the death-rates in 1923 from a number of causes, as compared with the death-rates from the same causes over the average of the previous ten years :—

TABLE 6.

Gains and Losses in 1923 *per* 1,000 *persons living, as compared with the average for the* 10 *years* 1913–1922—(See Table K).

Gains.	
Scarlet Fever	0·04
Measles	0·20
Diphtheria	0·05
Influenza	0·23
Diarrhœal Diseases	0·18
Enteric Fever	0·02
Pyæmia, Septicæmia	0·01
Phthisis	0·20
Tubercular Diseases (other)	0·10
Alcoholism	0·02
Nervous Diseases	0·15
Premature Birth	0·07
Bronchitis	0·10
Pneumonia	0·11
Respiratory Diseases (other)	0·08
Digestive System	0·05
Urinary Organs (Diseases of)	0·07
Old Age	0·03
Total	1·71
Losses.	
Whooping Cough	0·03
Cancer	0·29
Diseases of the Heart and Blood Vessels	0·22
Total	0·54
Balance of Gain from Above Causes	1·17
” ” All Causes	1·40

The following figures show the gains and losses in the death-rates in 1924 over the average of the previous ten years :—

TABLE 6.

Gains and Losses in 1924 *per* 1,000 *persons living, as compared with the average for the* 10 *years* 1914–1923—(See Table K).

Gains.

Scarlet Fever	0·03
Whooping Cough	0·06
Influenza	0·18
Diphtheria	0·02
Diarrhœal Diseases	0·11
Pyæmia and Septicæmia	0·02
Phthisis	0·24
Tubercular Diseases (other)	0·08
Alcoholism	0·02
Nervous Diseases	0·03
Premature Birth	0·04
Pneumonia	0·05
Digestive System	0·10
Urinary Organs (Diseases of)	0·04
Old Age	0·13
Total	1·15

Losses.

Measles	0·20
Erysipelas	0·01
Cancer	0·23
Diseases of the Heart and Blood Vessels	0·28
Bronchitis	0·05
Respiratory Diseases (other)	0·02
Total	0·79

Balance of Gain from Above Causes	0·36
" " All Causes	0·52

INFANTILE MORTALITY.

The figures relating to infantile mortality, divided into those concerning the first and second trimesters and the last six months of the first year, are shown in Table 7.

Table 7.—Infantile Mortality.

Deaths per 1,000 *births at the ages* 0–2 *months,* 3–5 *months, and* 6–11 *months' in successive years.*

Years	Months of Age			
	0–2	3–5	6–11	Under 1 year
1891–1895 (mean) ..	82·79	40·99	62·97	186·75
1896–1900 (mean) ..	83·44	42·43	66·28	192·16
1901–1905 (mean) ..	81·02	37·52	54·24	172·78
1906–1910 (mean) ..	73·89	29·12	44·27	147·28
1911–1915 (mean) ..	69·23	24·38	39·26	132·88
1916–1920 (mean) ..	58·46	17·72	28·65	104·82
1921	54·54	18·81	23·64	96·98
922	53·61	15·07	27·50	96·18
923	49·34	12·09	26·77	88·19
924	53·03	16·07	31·04	100·13

Table 8 allows a comparison with former years in respect of the infantil mortality rates from different causes for the whole of the first year of life.

TABLE 8.

CITY OF MANCHESTER.

CAUSES OF DEATH	DEATHS UNDER ONE YEAR PER 1,000 BIRTHS					
	1919	1920	1921	1922	1923	1924
All causes	97·76	97·08	96·98	96·18	88·19	100·13
Smallpox	..	..	..	..	..	..
Chickenpox	..	..	0·11	0·19	..	..
Measles	1·87	2·77	0·11	5·68	0·91	4·77
Scarlet Fever	..	0·16	0·11	0·19	0·13	0·07
Whooping Cough	0·93	1·99	5·23	2·14	4·81	2·52
Diphtheria and Membranous Croup	0·29	0·10	0·17	0·76	0·19	0·34
Erysipelas	0·07	0·10	0·11	..	0·13	0·20
Tuberculous Meningitis	0·93	0·42	0·62	1·26	1·17	0·82
Abdominal Tuberculosis	0·43	0·37	0·17	0·44	0·39	0·20
Other Tuberculous Diseases ..	0·50	0·57	0·57	0·38	0·32	0·82
Meningitis (*not Tuberculous*) ..	1·01	1·31	0·68	1·07	0·91	0·95
Convulsions	3·59	2·82	3·81	2·84	3·38	4·29
Laryngitis	0·07	0·10	0·11	0·13	..	0·14
Bronchitis	8·40	11·08	9·15	9·65	7·27	9·19
Pneumonia (all forms)	11·77	11·81	10·57	15·26	17·30	16·68
Diarrhœa and Enteritis	9·62	11·13	17·95	9·78	9·81	11·10
Gastritis..	1·22	1·25	1·14	0·57	0·84	1·09
Syphilis	3·02	1·99	1·82	1·96	0·84	1·50
Rickets	0·29	0·37	0·23	0·19	0·32	0·20
Injury at Birth	2·37	1·36	1·48	1·07	1·23	2·38
Atelectasis	1·94	2·61	3·70	3·34	2·99	1·36
Congenital Malformation	4·45	4·28	4·04	4·42	4·03	5·65
Premature Birth	23·26	19·70	18·86	19·55	18·00	20·35
Atrophy, Debility, and Marasmus	9·91	12·17	7·61	6·94	5·20	6·74
Overlying, found dead in bed, and suffocation	2·7	1·98	1·64	1·70	0·78	1·43
Other causes..	10·05	7·21	7·44	7·13	7·51	7·34

Herewith are given the tables of poor law relief, already mentioned :—

AMOUNT OF POOR LAW RELIEF.

This is shown in the table on page , compiled from a monthly statement rnished to the Hospitals Sub-Committee. Further particulars are given in c statement below, obtained from the Clerk to the Manchester Guardians.

MANCHESTER UNION.

turn relating to Sick Persons and Persons Suffering from Mental Infirmity Maintained by, or Chargeable to, the Guardians of the Poor of the Manchester Union on the 1*st January*, 1924.

Institution	Class of Case Maintained	Sick	Suffering from Mental Infirmity
Poor Law Establishments.			
(*a*) *Belonging to Manchester Union* :—			
Crumpsall Infirmary (2,250).	General Hospital and Lunacy	1,190	531
Withington Hospital (1,561).	General Hospital.. ..	1,083	—
Rose Hill Ophthalmia School (80)	Ophthalmic children ..	41	—
Booth Hall Infirmary (440).	General Hospital for Children	459	—
Langho Colony (500)	Epileptic persons ..	—	528
(*b*) *Belonging to other Unions* :—			
Tarvin	Feeble-minded persons.	—	19
Lunesdale	,, ,, .	—	10
West Derby	Mentally deficient persons	—	3
Non-Poor Law Establishments.			
(*a*) *County Mental Hospitals* :—			
Lancaster	Mental patients	—	391
Prestwich	,, ,, ...	—	832
Winwick..	,, ,, ...	—	367
Whittingham..	,, ,, ...	—	154
Rainhill	,, ,, ...	—	19
Cumberland and Westmoreland	,, ,, ...	—	1
Parkside..	,, ,, ...	—	1
Long Grove, Epsom	,, ,, ...	—	1
(*b*) *Hospitals, Homes, and Schools* :—			
St. John Baptist's Ophthalmia School, Chigwell	Ophthalmic boys.. ..	2	—
Ormerod Home, St. Annes-on-Sea	Delicate and Phthisical children	28	—
Pen-y-coed, Abergele	Phthisical children ..	10	—
	Carried forward	2,813	2,857

Institution	Class of Case Maintained	Sick	Suffering from Menta Infirmity
	Brought forward ..	2,813	2,857
Non-Poor Law Establishments (continued)— (*b*) *Hospitals, Homes, and Schools*–(continued)—			
Banksea Convalescent Home, Dovercourt	Convalescent	4	—
St. Anne's Ophthalmia School, London	Ophthalmic persons ..	1	—
Monsall Fever Hospital, Newton Heath	Infectious	6	—
Dr. Garrett Memorial Home Conway	Phthisical children ..	118	—
Royal Alexandra Hospital, Rhyl	Convalescent	5	—
St. Agnes Training School, Leyton	Feeble-minded women.	—	1
Thurlby House (now Hillside House School), Buntingford	Feeble-minded children	—	3
Sandlebridge School, Alderley Edge	Mentally defective adults	—	8
All Souls' Special School, Hillingdon, Essex	Feeble-minded girls.	—	7
Cumnor Rise Home, Botley, Oxford		—	4
Stoke Park Colony, Bristol.	Feeble-minded persons	—	40
Whittington Hall, Chesterfield		—	10
Pontville Home, Ormskirk..	Feeble-minded boys ..	—	4
Durran Hill House, Carlisle.	Mentally defective women	—	11
St. Joseph's Home, Sudbury	Feeble - minded young women	—	2
Allerton Priory, Woolton, Lancs.	Feeble-minded children	—	3
Royal Albert Institution, Lancaster	Feeble-minded adults..	—	11
Brentry Certified, near Bristol	Feeble-minded adults..	—	—
St. Rose's Home, Stroud, Gloucestershire	Cripples..	1	—
David Lewis Epileptic Colony, Alderley Edge	Epileptics	—	1
Starnthwaite Colony, Starnthwaite	,, ...	—	1
Eastern Hospital, Homerton	General Hospital.. ..	1	—
Eastby Sanatorium, Skipton	Consumptives	5	—
North of England Children's Sanatorium, Southport	Convalescent cases ..	2	—
Home for Incurables, Liverpool	Incurable cases	1	—
	Total	2,957	2,963

N.B.—The figures shown in brackets against the Institutions under heading 1 (
represent the accommodation for the class referred to.

Herewith are given the tables of poor law relief, already mentioned :—

AMOUNT OF POOR LAW RELIEF.

This is shown in the table on page 14, compiled from a monthly statement urnished to the Hospitals Sub-Committee. Further particulars are given in he statement below, obtained from the Clerk to the Manchester Guardians.

Manchester Union.

eturn relating to Sick Persons and Persons Suffering from Mental Infirmity Maintained by, or Chargeable to, the Guardians of the Poor of the Manchester Union on the 1*st January*, 1925.

Institution	Class of Case Maintained	Sick	Suffering from Mental Infirmity
Poor Law Establishments.			
(*a*) *Belonging to Manchester Union* :—			
Crumpsall Infirmary (2,550).	General Hospital and Lunacy	1,117	475
Withington Hospital (1,620).	General Hospital ..	1,106	—
Rose Hill Convalescent Home (103)	Convalescent children .	92	—
Booth Hall Infirmary (500).	General Hospital for Children	475	—
Langho Colony (575)	Epileptic persons ..	—	550
(*b*) *Belonging to other Unions* :—			
Garstang	Feeble-minded persons.	—	4
Ulverston Union	,, ,, .	—	12
Lunesdale	,, ,, .	—	10
West Derby	Mentally deficient persons	—	3
Metropolitan Asylums Board (Whiteoak School)	Ophthalmic children ..	3	—
Non-Poor Law Establishments.			
(*a*) *County Mental Hospitals*—			
Lancaster	Lunatics	—	362
Prestwich	,, ...	—	842
Winwick..	,, ...	—	453
Whittingham..	,, ...	—	148
Rainhill	,, ...	—	19
Menston, Leeds	,, ...	—	1
Cheddleton, Staffs	,, ...	—	1
Colney Hatch	,, ...	—	1
Parkside, Macclesfield.. ..	,, ...	—	1
Leicester City	,, ...	—	1
Stafford	,, ...	—	1
(*b*) *Hospitals, Homes, and Schools* :—			
St. John Baptist's Ophthalmia School, Chigwell	Ophthalmic boys.. ..	5	—
Ormerod Home, St. Annes-on-Sea	Delicate and Phthisical children	25	—
Pen-y-coed, Abergele	Phthisical children ..	10	—
	Carried forward.. ..	2,833	2,884

Institution	Class of Case Maintained	Sick	Suffering from Mental Infirmity
Non-Poor Law Establishments (continued)—	Brought forward ..	2,833	2,884
(*b*) *Hospitals, Homes, and Schools*— (continued)			
St. Anne's Ophthalmia School, London	Ophthalmic persons ..	6	—
Monsall Fever Hospital, Newton Heath	Infectious	4	—
Dr. Garrett Memorial Home, Conway	Phthisical children ..	120	—
Royal Alexandra Hospital, Rhyl	Convalescent	14	—
St. Agnes Training School, Leyton	Feeble-minded women.	—	1
Thurlby House (now Hillside House School), Buntingford	Feeble-minded children	—	3
Sandlebridge School, Alderley Edge	Mentally defective adults	—	8
All Souls' Special School, Hillingdon, Essex	Feeble-minded girls	—	7
Cumnor Rise Home, Botley, Oxford		—	3
Stoke Park Colony, Bristol.	Feeble-minded persons	—	39
Whittington Hall, Chesterfield		—	12
Pontville Home, Ormskirk..	Feeble-minded boys ..	—	3
Durran Hill House, Carlisle.	Mentally defective women	—	10
St. Joseph's Home, Sudbury	Feeble-minded young women	—	2
Allerton Priory, Woolton, Lancs.	Feeble-minded children	—	3
Royal Albert Institution, Lancaster	Feeble-minded adults..	—	10
David Lewis Epileptic Colony, Alderley Edge	Epileptics	—	3
Starnthwaite Colony, Starnthwaite	,, ...	—	1
Home for Aged Needy and Incurable Jews	Incurable Jews	4	—
Eastby Sanatorium, Skipton, Yorkshire	Phthisical boys	11	—
Banksea Convalescent Home, Dovercourt	Convalescent	1	—
Home for Incurables, Liverpool	Incurables	1	—
Florence Nightingale Hospital, Bury	Infectious	2	—
	Total	2,996	2,989
Central Hall } Maternity Homes	Maternity cases	3	—
Macalpine	,, ,, ...	2	—
Simpson Hill	,, ,, ...	1	—
Crossley	,, ,, ...	1	—

N.B.—The figures shown in brackets against the Institutions under heading 1 (*a*) represent the accommodation for the class referred to.

he Number of Persons who were in Receipt of Relief from the Manchester Board of Guardians during the Last Week in each Month of the Two Years 1923 and 1924.

	1924			1923		
	Indoor	Out-Door	Sick Remaining	Indoor	Out-Door	Sick Remaining
anuary ..	7,497	27,114	2,662	7,180	23,996	2,382
ebruary ..	7,473	23,633	2,591	7,243	23,539	2,415
arch ..	7,503	22,836	2,706	7,241	22,522	2,481
pril	7,331	22,195	2,667	7,245	28,948	2,518
ay	7,063	21,040	2,593	7,014	20,624	2,381
une	6,956	21,659	2,498	7,056	22,962	2,341
uly	6,885	20,708	2,416	6,944	23,168	2,296
ugust ..	6,883	20,661	2,369	6,851	23,463	2,260
ptember..	6,884	18,916	2,363	7,017	25,122	2,313
ctober ..	6,931	18,588	2,308	7,128	26,201	2,366
ovember .	7,144	18,809	2,381	7,198	23,092	2,389
ecember ..	7,137	18,726	2,348	7,356	23,300	2,551

TABLES.

1923.

TABLE A.—MANCHESTER, 1923.

CAUSES OF DEATH AT DIFFERENT LIFE PERIODS IN THE 52 WEEKS OF THE

PERSONS.—(MALES AND FEMALES.)

CAUSES OF DEATH	AGES AT DEATH											
	All Ages	Under 5 Years		5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 to 75
		0 to 1	1 to 5									
All Causes	10015	1357	790	156	135	239	257	466	783	1242	1574	1838
A.—GENERAL DISEASES	3874	734	368	70	66	146	168	277	369	547	535	455
B.—LOCAL DISEASES	5291	526	397	68	56	73	66	166	376	634	962	1215
C.—OTHER SPECIFIED DIS:	4	1	1	...	...	...	...	2	...	...	...	...
D.—ILL-DEFINED DISEASES	521	81	4	...	...	1	...	...	2	5	25	141
E.—VIOLENT DEATHS	325	15	20	18	13	19	23	21	36	56	52	27
A.—General Diseases.												
Smallpox.. Vaccinated	...	...	...	...	...	...	...	...	...	...	...	...
Smallpox.. Not Vaccinated	...	...	...	...	...	...	...	...	...	...	...	...
Smallpox.. No Statement	...	...	...	...	...	...	...	...	...	...	...	...
Cowpox	...	...	...	...	...	...	...	...	...	...	...	...
Chickenpox	...	...	...	...	...	...	...	...	...	...	...	...
Measles	83	14	66	3	...	...	...	...	...	...	...	...
Epidemic Rose Rash	1	1	...	...	...	...	...	...	...	...	...	...
Scarlet Fever	31	2	14	7	3	1	3	1	...	...	...	...
Typhus	...	...	...	...	...	...	...	...	...	..	...	...
Plague	...	...	...	...	...	...	...	...	...	...	...	...
Relapsing Fever	...	...	...	...	...	...	...	...	...	...	..	...
Influenza	281	13	15	2	4	7	7	25	29	45	56	60
Whooping Cough	184	74	110	...	...	...	...	...	...	...	...	...
Mumps	1	...	1	...	...	...	...	...	...	...	...	...
Diphtheria	47	3	24	13	6	...	...	1	...	...	...	...
Poliomyelitis	1	...	...	...	...	...	1	...	...	...	...	...
Cerebro-spinal Fever	—4	2	...	...	1	...	1	...	...	...	...	...
Simple Cont: Fever	...	...	...	...	...	...	...	...	...	...	...	...
Enteric Fever	9	...	...	1	...	...	...	4	1	1	...	...
Asiatic Cholera	...	...	...	...	...	...	...	...	...	...	...	...
Epidemic Diarrhœa	16	9	6	1	...	...	...	...	...	...	...	...
Diarrhœa	184	142	37	1	...	...	...	1	1	1	1	...
Dysentery	2	...	...	1	...	...	...	...	1	...	...	...
Malarial Fever	1	...	...	...	...	...	...	...	1	...	...	...
Trench Fever	...	...	...	...	...	...	...	...	...	...	...	...
Actinomycosis	...	...	...	...	...	...	...	...	...	...	...	...
Hydrophobia	...	...	...	...	...	...	...	...	...	...	...	...
Glanders	...	...	...	...	...	...	...	...	...	...	...	...
Anthrax	...	...	...	...	...	...	...	...	...	...	...	...
Tetanus	1	...	...	...	...	...	1	...	...	...	...	...
Syphilis	20	13	...	...	...	...	...	...	3	3	1	...
Gonorrhœa, Strict: Urethra	7	...	...	...	...	...	...	...	1	3	1	2
Puerperal.. Septicæmia	11	...	...	...	...	1	4	3	3	...	...	...
Puerperal.. Pyæmia	...	...	...	...	...	...	...	...	...	...	...	...
Puerperal.. Phlegmasia Dol:	...	...	...	...	...	...	...	...	...	...	...	...
Puerperal.. *Fever*	9	...	...	...	...	...	1	6	1	1	...	...
Infective Endocarditis	21	...	...	...	1	2	4	7	3	4	...	...
Epidemic Pneumonia Pneumonic Fever	1	...	...	..	...	1	...	...	...	...	...	...
Erysipelas	11	2	...	...	...	...	1	...	1	4	1	...
Septicæmia (not puerp:)	10	2	3	...	...	1	...	...	2	...	1	1
Pyæmia (not puerp:)	2	...	...	...	1	1	...	...	...	...	...	...
Phlegmon	1	...	...	...	...	...	..	...	...	...	1	...
Phagedæna	1	...	1	...	...	...	...	...	...	...	...	...
Other Septic Diseases	...	...	...	...	...	...	...	...	...	...	...	...
Tubercular Phthisis	867	3	10	5	15	91	112	165	178	178	79	28
Phthisis	64	...	2	3	3	5	5	16	12	15	3	..
Tubercular Meningitis	96	18	38	15	10	6	3	2	2	2	...	..

TABLE A, 1923—*continued.*

CAUSES OF DEATH	All Ages	Under 5 Years 0 to 1	 1 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 to 75	75 to 85	85 and upwards
.—General Diseases— *continued*														
ercular Peritonitis	40	1	10	2	2	7	4	4	3	5	2	...	...	...
es Mesenterica	9	5	2	...	...	...	...	...	1	1	...	...	...	...
ous	...	...	...	...	...	...	...	...	...	...	...	...	...	...
ercle of other organs	49	2	1	2	4	6	8	3	6	6	4	7	...	...
eral Tuberculosis	27	...	4	4	4	5	2	2	3	2	1	...	...	...
ofula	...	...	...	...	...	...	...	...	...	...	...	...	...	...
asitic Diseases	...	...	...	...	...	...	...	...	...	...	...	...	...	...
vation	...	...	...	...	...	...	...	...	...	...	...	...	.	...
rvy	2	1	...	...	...	...	...	1	...	...	...	...	...	...
oholism, Delirium Tremens	4	...	...	...	...	...	...	...	2	...	1	1	...	...
um, Morphia Habit	...	...	...	...	...	...	...	...	...	...	...	...	...	...
maine Poisoning	...	...	...	...	...	...	...	...	...	...	...	...	..	...
ustrial soning { Lead	4	...	...	...	...	...	...	...	..	2	1	1	...	...
Phosphorus	...	...	...	...	...	...	...	...	...	...	...	...	..	...
Arsenic, &c.	...	...	...	...	...	...	...	...	...	...	...	...	...	...
um: Fever, Acute Rheum:	49	...	...	5	8	7	4	6	6	6	2	4	1	...
umatism of Heart	...	...	...	...	...	...	...	...	...	...	...	...	...	...
onic Rheumatism	35	...	...	1	...	...	2	...	1	2	7	16	6	...
um: Arthritis, Rheum: Gout	37	...	...	...	...	...	...	1	2	2	10	13	9	...
t	...	...	...	...	...	...	...	...	...	...	...	...	...	...
cer—Buccal Cavity	66	...	...	...		...	...	...	1	15	24	20	6	...
Stomach and Liver	346	2	...	...	...	...	...	3	28	70	108	109	24	2
Peritoneum, Intest., Rectum	196	...	...	...	1	...	1	5	9	45	56	64	14	1
Female Genital Organs	96	...	...	...	...	...	...	4	16	31	19	17	9	...
Breast	85	...	...	..	...	...	...	...	13	27	26	15	4	...
Skin	11	...	...	...	...	...	...	...	...	1	6	3	1	...
Others or unspecified	249	1	1	1	1	1	1	8	16	49	87	56	23	4
ets	20	5	14	1	...	...	...	...	...	...	...	...	...	...
oura	4	...	...	...	1	1	...	...	...	...	...	1	1	...
nophilia, Hæm: Diathesis	...	...	...	...	...	...	...	...	...	...	...	...	...	...
mia, Leucocythæmia	75	2	2	1	...	2	..	3	16	13	17	16	3	..
etes Mellitus	78	...	...	1	1	1	3	6	7	12	20	21	6	...
er Constitutional Diseases	...	...	...	...	...	...	...	...	...	...	...	...	...	..
nature Birth	277	277	...	...	...	...	...	...	...	...	...	...	...	..
genital Defects	65	62	2	...	...	...	...	...	...	1	...	...	...	..
ry at Birth	19	19	...	...	...	...	...	...	...	...	...	...	...	...
ectasis	46	46	...	...	...	...	...	...	...	...	...	...	...	..
t of Breast Milk	2	2	...	...	...	...	...	...	...	...	...	...	..	.
thing	10	5	5	...	...	...	...	...	...	...	...	...	...	...
ers of Early Infancy	6	6	...	...	...	...	...	...	..	...	...	...	...	..
-Local Diseases.														
ERVOUS SYSTEM.														
mmation of Brain	52	14	17	3	4	4	1	3	2	2	2	...	...	...
ening of Brain	1	...	...	...	...	...	...	...	...	...	...	1	...	...
eral Paraly: of Insane	35	...	...	...	...	...	...	1	9	19	3	3	...	...
nity (not puerperal)	37	...	...	...	...	...	1	1	6	15	11	3	...	...
rea	1	...	...	...	...	1	...	...	...	...	...	...	..	..
epsy	40	...	...	1	1	1	5	9	7	4	8	2	...	2
vulsions	63	52	11	...	...	...	...	...	...	...	...	..	...	...
ngismus Stridulus	4	2	2	...	...	...	...	..	...	...	...	...	...	..
omotor Ataxy	6	...	...	...	...	...	...	...	2	...	2	1	1	...
of Spinal Cord	47	...	1	1	...	...	...	1	5	12	15	9	3	...
ritis	2	...	...	...	...	...	...	...	...	...	...	1	1	...
n Tumour	24	...	...	1	3	2	1	1	7	4	3	1	1	...
Encephalitis	1	...	...	...	1	..	...	...	..	..	...	..	...	...
ephalitis Lethargica	15	...	1	...	2	1	...	1	2	4	4	...	..	...
ous System (other Dis:)	18	1	2	1	...	...	...	1	1	3	1	3	5	...
ISEASES OF SPECIAL SENSE ORGANS.														
s, Mastoid Disease	27	7	2	4	3	6	1	1	3	...	...	...	.	...
taxis, Nose Disease	...	...	...	...	...	...	...	...	...	...	...	...	...	..
thalmia, Eye Disease	2	1	...	...	...	...	...	1	...	...	..	...	..	..

TABLE A, 1923—*continued.*

CAUSES OF DEATH	AGES AT DEATH											
	All Ages	Under 5 Years 0 to 1	Under 5 Years 1 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 to 75
3. DISEASES OF HEART.												
Valvular Dis : Endocarditis	531	...	2	10	7	16	15	31	66	95	124	114
Pericarditis	21	...	2	2	3	2	...	...	2	4	3	2
Hypertrophy of Heart	...	...	...	...	...	...	...	...	...	...	...	...
Angina Pectoris	24	...	...	...	...	...	..	...	...	3	9	9
Dilatation of Heart	84	1	2	...	...	...	1	3	5	12	25	23
Fatty Degen : of Heart	30	...	...	...	...	...	...	...	3	9	11	6
Syncope, Heart Disease	395	1	3	1	1	2	3	5	16	44	87	137
4. DIS : OF BLOOD VESSELS.												
Cerebral Hæmorrhage	376	1	...	...	1	...	...	1	14	45	91	138
Apoplexy, *Hemiplegia*	82	...	...	...	...	...	...	...	3	1	21	37
Aneurism	17	...	...	...	...	...	...	...	4	4	6	3
Senile Gangrene	25	...	...	...	...	...	...	...	...	1	5	11
Embolism, Thrombosis	81	...	3	...	...	...	2	2	2	8	16	30
Phlebitis	2	...	...	...	...	...	...	...	1	...	...	1
Varicose Veins	7	...	...	...	...	...	...	...	1	...	4	1
Blood Vessels (Other Diseases)	252	...	...	...	...	...	1	...	1	15	59	97
5. DIS : OF RESPIRATORY SYS :												
Laryngitis	2	...	...	...	...	...	...	...	...	...	1	...
Memb: Laryng: (Not Diphth:)	1	...	1	...	...	...	...	...	...	...	...	...
Croup	...	...	...	...	...	...	...	...	...	...	...	...
Larynx (Other Dis:)	1	...	...	...	...	...	...	...	...	...	1	...
Bronchitis	1,091	112	66	2	3	1	4	9	50	81	183	322
Pneumonia Lobar-Croupous.	354	29	24	8	8	12	8	31	59	72	42	44
Broncho-Lobular.	594	230	204	8	4	1	...	8	11	32	39	42
"*Pneumonia*"	26	7	4	1	...	1	...	...	3	4	2	4
Emphysema, Asthma	22	...	...	...	...	...	1	...	...	7	8	5
Pleurisy	33	3	7	...	...	1	...	3	5	4	2	5
Fibroid Disease of Lung	1	...	...	...	...	...	...	...	...	...	...	1
Respiratory Dis: (Other)	17	1	1	...	1	...	...	...	2	...	1	5
6. DIS: OF DIGESTIVE SYS:												
Tonsillitis, Quinsy	10	...	3	5	...	...	...	...	1	1	...	...
Mouth, Pharynx	6	...	2	...	...	...	...	1	...	1	1	...
Gastric Ulcer	59	...	...	...	...	...	2	7	15	13	13	7
Gastric Catarrh	3	1	...	...	...	...	...	...	...	...	...	...
Stomach (Other Dis:)	45	16	3	1	1	...	...	1	2	6	6	9
Enteritis	9	...	...	...	...	...	...	1	1	...	...	4
Gastro-Enteritis	15	...	8	...	...	1	...	...	...	...	1	2
Appendicitis, Perityph :	53	...	6	4	8	8	2	5	3	6	9	1
Hernia	43	3	1	...	...	...	...	...	2	8	14	12
Intestinal Obstruct:	30	6	3	1	...	1	...	1	4	2	3	3
Other Diseases of Intestines	14	5	2	...	1	2	1	1	1	1	...	...
Peritonitis	13	1	1	...	...	1	1	2	1	2	2	1
Cirrhosis of Liver	24	...	...	...	...	...	...	1	4	4	9	6
Liver	38	11	3	...	...	...	1	...	1	1	7	12
Biliary Calculi	17	...	...	..	...	...	...	1	2	6	5	3
Digestive System (Other Dis:)	12	...	...	...	...	...	1	1	2	2	2	2
7. DIS : OF LYMPHATIC AND DUCTLESS GLANDS.												
Spleen, Disease of	...	...	..	...	...	...	...	...	...	...	.	...
Lymphat: Syst: (Other Dis:)	20	2	1	1	...	1	1	2	3	4	5	...
Thyroid Body (Other Dis:)	3	...	...	...	...	...	...	...	1	1	...	1
Addison's Dis : (Dis: of)	6	...	...	...	...	1	1	1	1	1	1	...
8. DISEASES OF URINARY SYSTEM.												
Nephritis Ac: Uræmia	60	...	5	5	...	2	1	3	3	11	13	12
Ch : Bright's Dis : Albumin :	183	...	...	3	...	1	2	7	18	38	58	44
Calculus	10	...	...	...	...	1	...	...	2	2	4	1
Bladder and Prostate Dis :	57	...	...	...	...	...	...	...	2	2	13	25
Urinary Syst : (Other Dis)	15	...	1	...	...	...	...	1	1	6	1	3

TABLE A, 1923—*concluded.*

CAUSES OF DEATH	Ages at Death													
	All Ages	Under 5 Years: 0 to 1	Under 5 Years: 1 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 to 75	75 to 85	85 and upwards
ISEASES OF GENERATIVE SYSTEM.														
ian Tumour	7	...	...	...	...	...	...	1	1	2	2	1	...	...
Dis : of Ovary	1	...	...	...	...	...	...	...	...	1	...	...	...	...
ne Tumour	1	...	...	...	...	...	...	...	...	1	...	...	...	...
Dis: of Uterus and Vagina	1	...	...	...	...	...	...	...	1	..	...	...	...	...
d : of Menstruation	...	...	...	...	...	...	...	...	...	...	...	...	...	...
r: and Mam: Orgs: (other)	2	...	...	...	...	...	...	...	...	1	...	1	...	...
DISEASES OF PREGNANCY AND CHILDBIRTH.														
ion, Miscarriage	...	...	...	...	...	...	...	...	...	...	...	...	...	...
eral Mania	1	...	...	...	...	...	...	...	1	...	...	...	...	...
eral Convulsions	5	...	...	...	...	...	2	2	1	...	...	...	...	...
nta Præv: Flooding.........	10	...	...	...	...	...	1	2	6	1	...	...	...	...
Ac: of Preg: & Childbirth	16	...	...	...	...	...	3	12	1	...	...	...	...	...
ISEASES OF LOCOMOTOR SYSTEM.														
, Necrosis	...	...	...	...	...	...	...	...	...	...	...	...	...	...
tis, Periostitis	11	...	1	2	...	...	...	...	1	1	2	4	...	...
notor Sys : (Other).........	15	...	...	2	4	2	...	...	2	3	1	...	1	...
ISEASES OF THE SKIN.														
Bedsore	1	...	...	...	...	...	...	...	...	...	...	...	1	...
ia	2	...	...	...	...	...	...	...	...	1	...	...	1	...
higus...........................	15	15	...	...	...	...	...	...	...	...	...	...	...	...
Diseases (other)	14	4	2	1	...	1	3	...	...	1	1	...	1	...
ther Specified Diseases	4	1	1	...	...	...	...	2	...	...	...	...	...	...
ll-defined and not Specid Diseases.														
hy, Debility.................	86	80	4	...	...	1	...	...	1	...	...	...	...	...
ge	421	...	...	...	...	...	...	...	...	1	20	138	201	61
y, Ascites, Anasarca	...	...	...	...	...	...	...	...	...	...	...	...	...	...
ur	11	...	...	...	...	...	...	...	1	4	3	3	...	...
ss	...	...	...	...	...	...	...	...	...	...	...	...	...	...
rrhage	...	...	...	...	...	...	...	...	...	...	...	...	..	...
n (cause unascertained)...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Ill-defined	3	1	...	...	...	...	...	...	...	...	2	...	...	...
.—Violent Deaths.														
CIDENT.														
es and Quarries............	1	...	...	...	...	...	...	...	...	1	..	...	...	...
hicles { On Railways ...	10	...	1	...	1	...	...	3	...	2	3	...	...	...
hicles { In Streets.........	54	...	2	9	5	8	8	4	2	5	7	1	3	...
Boats, Docks (not owning)	...	...	...	...	...	...	...	...	...	...	...	...	...	...
g Operations	...	...	...	...	...	...	...	...	...	...	...	...	...	...
nery	5	...	...	...	...	...	2	...	3	...	...	...	...	...
ns and Implements	2	...	...	...	...	...	...	...	1	...	1	...	...	...
and Scalds	34	2	14	6	...	...	1	1	3	2	2	2	1	...
, Poisonous Vapours......	7	...	...	...	...	1	...	...	3	3	...	...	...	...
ing	30	...	1	2	2	1	6	1	1	8	6	2	...	...
ation..........................	17	12	1	...	...	2	...	1	1	...	...	...	...	...
....	76	...	1	1	2	2	4	4	6	11	14	13	15	3
er Agencies..................	1	...	...	...	...	...	...	...	...	...	1	...	...	...
ise or not Stated	17	1	...	...	2	4	...	2	2	4	2	...	...	...
MICIDE.	1	...	...	...	1	...	...	...	...	...	...	...	...	...
CIDE.	69	...	...	...	...	1	2	5	13	20	16	9	3	...
CUTION.	1	...	..	...	...	...	..	...	1	...	...	...	...	..

TABLE B.—MANCHESTER, 1923.

CAUSES OF DEATHS AT DIFFERENT LIFE PERIODS—MALES.

Classes	CAUSES OF DEATH	All Ages	Ages at Death—in years										
			Under 5 Years										
		Total	0 to 1	1 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 to 75
	All Causes	5187	780	423	80	71	128	124	224	438	727	843	881
A	Smallpox	...	...	...	...	...	...	...	...	...	...	...	...
	Measles	39	5	33	1	...	...	...	...	...	...	...	...
	Scarlet Fever	14	2	6	3	2	1	...	...	...	...	...	...
	Typhus Fever	...	...	...	...	...	...	...	...	...	...	...	...
	Whooping Cough	91	36	55	...	...	...	...	...	...	...	...	...
	Diphtheria	23	2	12	6	2	...	...	1	...	...	...	...
	Ill-defined Fever	...	...	...	...	...	...	...	...	...	...	...	...
	Enteric Fever	7	...	...	...	...	...	...	4	...	1	...	...
	Influenza	123	4	5	1	1	5	3	13	17	22	27	23
	Epidemic Diarrhœa	11	7	3	1	...	...	...	...	...	...	...	...
	Diarrhœa, Dysentery, Simple Cholera	119	88	26	1	...	...	...	1	2	...	1	...
	Venereal Affections	15	5	...	...	...	...	...	...	2	4	2	2
	Erysipelas	5	1	...	...	...	...	1	...	...	1	1	...
	Pyæmia, Septicæmia (others)	8	2	3	...	...	1	...	...	1	...	1	..
	Other Zymotics	6	2	1	...	...	...	2	...	1	...	...	...
	Tuberc. Periton: Tabes Mes:	27	5	7	2	1	2	1	3	1	4	1	...
	Tubercular Meningitis	42	8	19	5	4	1	2	2	...	1	...	...
	Phthisis	562	3	5	4	4	50	59	95	128	135	62	15
	Tuberculous Dis. (other)	41	2	1	...	8	6	7	2	4	6	1	4
	Parasitic Diseases	...	...	...	...	...	...	...	...	...	...	...	...
	Alcoholism	2	...	...	...	...	...	...	...	1	...	1	...
	Rheumatic Fever	20	...	...	3	1	3	...	3	4	2	1	2
	Cancer	538	2	1	1	1	...	2	6	26	131	183	149
	Premature Birth	150	150	...	...	...	...	...	...	...	...	...	...
	Congenital Defects	27	27	...	...	...	...	...	...	...	...	...	...
	Atelectasis	35	33	1	...	...	...	...	...	...	1	...	...
B and C	Epilepsy	22	..	..	1	...	1	3	5	2	3	4	2
	Convulsions	39	31	8	...	...	...	...	...	...	...	...	...
	Nervous Syst: (other)	149	13	18	5	6	5	1	4	24	36	23	8
	Cereb: Haem: Apoplexy, Hemip:	199	...	...	...	1	...	...	...	5	22	50	84
	Heart and Blood Vessel Dis:	711	1	5	5	8	10	7	18	52	96	168	222
	Pleurisy	19	1	4	...	...	...	...	3	3	3	1	2
	Croup	...	...	...	...	...	...	...	...	...	...	...	...
	Bronchitis	524	65	33	...	1	...	3	8	34	51	98	138
	Pneumonia	568	163	126	10	7	9	5	21	48	79	51	36
	Respiratory Dis: (other)	24	1	1	...	1	...	...	...	...	5	7	4
	Cirrhosis	12	...	...	...	...	...	...	1	1	1	6	3
	Digestive Syst: (other)	182	23	20	8	5	9	5	8	21	20	27	20
	Urinary Syst: (other)	187	...	2	3	...	1	...	5	15	32	51	54
	Generative Organs	...	..	...	...	...	...	...	...	...	...	...	...
	Other specified Diseases	214	45	15	10	6	12	3	5	20	25	32	29
D	Marasmus and Atrophy	48	46	1	...	...	...	..	...	1	...	..	...
	Old Age	166	...	...	...	...	...	...	...	...	...	13	62
	Other Ill-defined Causes	...	...	...	...	...	...	...	...	...	...	...	...
E	Violence	161	7	12	10	11	12	19	13	15	28	18	8
	Homicide	1	...	...	...	1	...	...	...	...	...	...	...
	Suicide	55	...	...	...	...	...	1	3	9	18	13	8
	Execution	1	...	...	...	...	...	...	...	1	...	...	...

TABLE C.—MANCHESTER, 1923.

CAUSES OF DEATHS AT DIFFERENT LIFE PERIODS—FEMALES.

CAUSES OF DEATH	All Ages	AGES AT DEATH—IN YEARS												
		UNDER 5 YEARS		5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 to 75	75 to 85	85 and upwards
	Total	0 to 1	1 to 5											
All Causes	4828	577	367	76	64	111	133	242	345	515	731	957	571	139
Smallpox	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Measles	44	9	33	2	...	...	...	...	...	...	...	...	...	...
Scarlet Fever	17	...	8	4	1	...	3	1	...	...	...	...	...	...
Typhus Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Whooping Cough	93	38	55	...	...	...	...	...	...	...	...	...	...	...
Diphtheria	24	1	12	7	4	...	...	...	...	..	...	...	...	..
Ill-defined Fever	...	...	...	...	...	...	...	..	...	...	...	...	...	...
Enteric Fever	2	...	...	1	..	...	...	...	1	..	...	...	...	...
Influenza	158	9	10	1	3	2	4	12	12	23	29	37	12	4
Epidemic Diarrhœa	5	2	3	...	...	...	...	...	...	...	...	...	...	...
Diarrhœa, Dysentery, Simple Cholera	67	54	11	1	...	...	...	...	...	1	...	...	...	...
Venereal Affections	12	8	...	...	...	...	...	...	2	2	...	...	...	...
Erysipelas	6	1	...	...	...	...	...	...	1	3	...	...	1	...
Pyæmia, Septicæmia (others)	3	...	1	...	...	...	...	...	1	...	...	1	...	...
Puerperal Fever	20	...	...	...	...	1	5	9	4	1	...	...	...	...
Other Zymotics	3	1	...	...	1	...	1	...	...	...	...	...	...	...
Tubercular Periton: Tabes Mes.	22	1	5	...	1	5	3	1	3	2	1	...	...	...
Tubercular Meningitis	54	10	19	10	6	5	1	...	2	1	...	...	...	...
Phthisis	369	...	7	4	14	46	58	86	62	58	20	13	1	...
Tuberculous Diseases (other)	35	...	4	6	...	5	3	3	5	2	4	3	...	...
Parasitic Diseases	...	...	...	...	...	...	..	...	...	...	...	...	...	...
Alcoholism	2	...	...	...	...	...	...	...	1	...	...	1	...	...
Rheumatic Fever	29	...	...	2	7	4	4	3	2	4	1	2	...	...
Cancer	511	1	...	...	1	1	...	14	57	107	143	135	47	5
Premature Birth	127	127	...	...	...	...	...	...	...	...	...	...	...	...
Congenital defects	30	29	1	...	...	...	...	...	...	...	...	...	...	...
Atelectasis	19	19	...	...	...	...	..	...	...	...	...	...	...	...
Epilepsy	18	...	...	...	1	...	2	4	5	1	4	...	...	1
Convulsions	24	21	3	...	...	...	...	...	...	...	...	...	...	...
Nervous System (other)	94	4	5	1	4	3	2	5	10	23	18	14	5	...
Cerebral Hæmorrhage, Apoplexy, and Hemiplegia	259	1	...	...	...	...	...	1	12	24	62	93	53	13
Heart and Blood Vessel Diseases	758	1	7	8	3	10	15	23	49	99	181	210	126	26
Pleurisy	14	2	3	..	...	1	...	...	2	1	1	3	1	...
Croup	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Bronchitis	567	47	33	2	2	1	1	1	16	30	85	184	131	34
Pneumonia	406	103	106	7	5	5	3	18	25	29	32	54	18	1
Respiratory Diseases (other)	20	...	1	...	...	...	1	...	2	2	4	7	2	1
Cirrhosis	12	...	...	...	...	...	...	...	3	3	3	3	...	...
Digestive System (other)	185	20	12	3	5	4	3	13	14	29	36	30	11	5
Urinary System (other)	138	...	4	5	...	3	3	6	11	27	38	31	10	...
Generative Organs and Childbirth	44	...	...	...	...	...	6	17	11	6	2	2	...	...
Other specified Diseases	238	26	13	4	7	7	12	20	21	26	38	47	17	...
Marasmus and Atrophy	38	34	3	...	...	1	...	...	...	...	...	...	...	...
Old Age	255	...	...	...	...	...	...	...	...	1	7	76	124	47
Other Ill-defined Causes	1	...	..	...	...	...	...	...	...	...	1	...	...	...
Violence	93	8	8	8	1	6	2	3	7	8	18	10	12	2
Homicide	...	...	...	...	..	...	...	...	...	...	...	...	...	...
Suicide	14	...	...	...	..	1	1	2	4	2	3	1	...	...

TABLE D.

CITY OF MANCHESTER, 1923.—CAUSES OF DEATH IN INFANCY AND CHILDHOOD.

CAUSES OF DEATH	UNDER ONE YEAR			Total under One Year	ONE AND UNDER FIVE YEARS			
	Under 3 months	3-6 months	6–12 months		1–	2–	3–	4–
All Causes	759	186	412	1,357	455	162	117	55
Chicken Pox................	...	...	...	...	...	...	...	...
Measles	...	2	12	14	46	15	3	2
Scarlatina	...	...	2	2	3	...	7	4
Whooping Cough	11	13	50	74	63	23	18	6
Diphtheria.....................	1	...	2	3	3	7	9	5
Erysipelas	1	1	...	2	...	...	...	...
Diarrhœal Diseases	63	42	46	151	37	3	3	...
Gastritis........................	10	2	1	13	...	1	...	1
Syphilis	8	5	...	13	...	...	...	...
Tabes Mesenterica and Tuberc. Peritonitis	2	1	3	6	5	4	2	1
Tubercular Meningitis	...	4	14	18	16	14	4	4
Tuberculosis (other).........	...	1	4	5	6	5	4	2
Rickets	...	...	5	5	11	1	2	...
Premature Birth	276	1	...	277	...	...	...	...
Injury at Birth	19	...	...	19	...	...	...	...
Atelectasis......................	46	...	...	46	...	...	..	...
Congenital Malformations	54	2	6	62	1	...	...	1
Convulsions	36	6	10	52	9	1	...	1
Meningitis.............	4	3	7	14	8	3	3	3
Nervous Diseases (other) ...	1	...	2	3	1	3	1	1
Bronchitis	43	28	41	112	45	7	9	5
Pneumonia	46	53	167	266	145	50	32	5
Other Respiratory Diseases	1	1	2	4	5	1	3	...
Atrophy, Marasmus	72	6	2	80	4	...	...	...
Found Dead in Bed (overlaid)	8	2	...	10	...	...	...	...
Suffocation	2	...	...	2	1	...	...	...
Violence (other forms)	...	...	3	3	9	3	2	5
Ill-defined Causes............	1	...	...	1	1	...	...	...
Unclassified	54	13	33	100	37	21	15	9

	Year	Estimated Population (Mean)	Persons Marr ed													Total Deaths		Infantile Mortality	Year
				Births	Deaths (all causes)	Smallpox	Measles	Scarlet Fever	Diphtheria	Whooping Cough	Typhus Fever	Enteric Fever	Simple Continued Fever	Diarrhœal Diseases	Violence	Inquest Cases	Deaths in Public Institutions		
Quinquennial Average	1871–1875	477,344	24·6	38·9	28·3	0·26	0·64	1·08	0·08	0·78	0·14	0·43	0·21	1·95	0·94	7·2	13·4	198	.. 1871–1875
	1876–1880	509,802	18·6	38·7	26·2	0·24	0·53	1·07	0·13	0·84	0·08	0·29	0·11	1·26	0·89	7·5	14·3	172	.. 1876–1880
	1881–1885	542,746	17·9	35·1	23·6	0·04	0·71	0·48	0·10	0·68	0·05	0·20	0·03	0·99	0·72	7·0	15·9	175	.. 1881–1885
	1886–1890	575,630	16·6	33·4	24·6	0·02	0·83	0·50	0·32	0·54	0·02	0·30	0·01	1·08	0·78	6·9	17·7	183	.. 1886–1890
	1891–1895	517,801	16·9	33·2	23·6	0·03	0·62	0·26	0·27	0·64	0·00	0·24	0·01	1·19	0·77	7·1	19·2	186	.. 1891–1895
	1896–1900	539,599	18·2	32·5	22·7	..	0·89	0·20	0·13	0·53	0·00	0·18	0·01	1·69	0·73	7·1	20·2	192	.. 1896–1900
	1901–1905	554,355	17·4	30·9	20·1	0·01	0·55	0·19	0·22	0·41	0·00	0·13	0·00	1·15	0·72	7·1	24·4	173	.. 1901–1905
	1906–1910	660,049	17·0	28·1	17·7	..	0·54	0·16	0·17	0·37	0·00	0·10	0·00	0·76	0·68	7·4	27·3	147	.. 1906–1910
	1911–1915	731,677	17·6	24·8	16·4	..	0·50	0·12	0·14	0·25	..	0·05	..	0·84	0·67	7·9	30·8	133	.. 1911–1915
	1916–1920	770,330	16·7	19·2	14·1	..	0·24	0·04	0·08	0·21	..	0·02	0·00	0·30	0·49	6·4	32·3	105	.. 1916–1920
	1921 (Census) ..	744,000	19·3	23·7	13·6	..	0·01	0·08	0·12	0·23	..	0·02	..	0·52	0·47	5·8	36·4	97	 1921
	1922	746,986	16·7	21·2	14·3	..	0·47	0·08	0·11	0·13	..	0·01	..	0·26	0·48	5·8	36·1	96	 1922
	1923	752,100	14·5	20·5	13·3	..	0·11	0·04	0·06	0·24	..	0·01	..	0·27	0·34	5·5	38·8	88	 1923
	1924	755,119	16·6	19·2	14·0	..	0·48	0·04	0·08	0·15	..	0·02	..	0·28	0·41	5·6	37·7	100	 1924

The populations and rates prior to 1891 are those for the Unions of Manchester, Chorlton, and Prestwich, which have been taken to approximately represent "Manchester." The City was extended to include Moss Side and Withington in November, 1904, and to include Gorton and Levenshulme in November, 1909.

Table F.

Manchester—Annual Rates of Mortality from certain causes of Dea

YEAR	ANNUAL RATES PER 1,000 PERSONS LIVING										R PER BI
	Cancer	Tuberc. Peritonitis Tabes Mes.	Phthisis	Other Tuberc. Diseases	Diseases of Nervous System	Diseases of Heart and Blood Vessels	Diseases of Respiratory System	Diseases of Digestive System	Diseases of Urinary System	Diseases of Generative System	Puerperal Fever
1881-1885 ..	0·50	0·35	2·42	0·57	3·28	1·37	5·41	1·23	0·48	0·08	3·0
1886-1890 ..	0·64	0·36	2·24	0·59	3·09	1·73	5·76	1·23	0·61	0·08	3·22
1891-1895 ..	0·62	0·22	2·09	0·75	1·74	2·53	5·56	1·07	0·52	0·07	2·7
1896-1900 ..	0·73	0·19	2·04	0·63	1·32	2·54	5·03	1·04	0·49	0·09	1·5
1901-1905 ..	0·80	0·16	1·94	0·55	1·17	2·56	4·29	0·95	0·49	0·08	1·21
1906-1910 ..	0·88	0·14	1·65	0·45	0·95	2·56	3·75	0·84	0·54	0·07	1·2
1911-1915 ..	1·01	0·12	1·59	0·38	0·79	2·34	3·45	0·68	0·56	0·09	1·2
1916-1920 ..	1·08	0·09	1·39	0·28	0·54	2·27	2·98	0·51	0·47	0·06	1·5
1921	1·26	0·07	1·30	0·27	0·54	2·37	2·79	0·51	0·47	0·08	1·5
1922	1·28	0·06	1·27	0·27	0·50	2·45	3·23	0·42	0·51	0·08	1·8
1923	1·39	0·07	1·24	0·23	0·46	2·56	2·81	0·52	0·43	0·06	1·3
1924	1·37	0·06	1·18	0·24	0·55	2·65	3·09	0·44	0·46	0·08	1·6

See footnotes to Table E.

G, 1923.—POPULATION, AREA, DENSITY. TOTAL BIRTHS AND DEATHS, WITH BIRTH AND DEATH RATES.

[INSTITUTION POPULATIONS, BIRTHS AND DEATHS, DISTRIBUTED.]

ATISTICAL IVISIONS	Estimated Population	Area in Acres	Persons to an Acre	BIRTHS		DEATHS		Natural Rate of Increase	Mean Death Rate 1913-1922
				Total	Rate per 1,000	Total	Rate per 1,000		
Manchester	752,100	21,690	35	15,388	20·46	10,015	13·32	7·14	14·72
hester Township......	109,223	1,646	66	2,931	26·84	1,965	17·99	8·85	22·28
Manchester	207,213	8,033	26	3,988	19·25	2,482	11·98	7·27	12·64
Manchester	435,664	12,011	36	8,469	19·44	5,568	12·78	6·66	13·90
ats	39,859	399	100	1,088	27·30	666	16·71	10·59	22·13
al	18,799	745	25	408	21·70	386	20·53	1·17	23·00
eorge's	50,565	502	101	1,435	28·38	913	18·06	10·32	22·16
ham	43,105	919	47	742	17·21	537	12·46	4·75	11·27
psall	12,762	2,212	6	166	13·02	140	10·97	2·05	11·72
ley	13,552	1,080	13	231	17·05	151	11·14	5·91	11·20
urhey	17,956	193	93	346	19·27	191	10·64	8·63	13·92
on	25,889	1,299	20	424	16·38	280	10·83	5·55	9·74
on Heath	41,272	1,341	31	868	21·03	540	13·08	7·95	14·04
ord	26,845	288	93	600	22·35	299	11·14	11·21	15·09
ck	11,183	96	116	266	23·79	154	13·77	10·02	15·21
on	14,649	605	24	345	23·56	190	12·97	10·59	12·60
ick	41,075	509	81	920	22·39	570	13·87	8·52	15·63
shaw	33,024	581	57	632	19·14	426	12·90	6·24	14·12
on (West)	29,304	318	92	675	23·03	361	12·32	10·71	15·60
olme and Kirk.	42,326	1,412	30	672	15·88	478	11·29	4·59	10·00
lton-upon-Med.	60,511	647	93	1,212	20·03	929	15·35	4·68	18·59
ne	65,229	477	137	1,633	25·04	934	14·32	10·72	18·88
Side	36,233	421	86	554	15·29	490	13·53	1·76	12·07
ington	62,608	5,899	11	1,000	15·97	649	10·37	5·60	10·26
on	43,574	1,141	38	882	20·24	492	11·29	8·95	11·63
nshulme	21,780	606	36	289	13·27	239	10·97	2·30	9·57

TABLE H, 1923.

BIRTHS REGISTERED IN THE CITY OF MANCHESTER, IN ITS MAIN DI
AND IN DISTRICTS; DISTINGUISHING LEGITIMATE AND ILLEGITIMATE B
ALSO THE PROPORTION OF MORTALITY AMONG INFANTS OF BOTH CLASSES
ONE YEAR OF AGE.

STATISTICAL DIVISIONS		BIRTHS		Percentage of Illegitimate Births to Total Births	DEATHS UNDER 1 YEAR		PROPORTION OF DEATHS UNDER 1 YEAR PER 1,000 BIRTHS		
		Total	Illegitimate		Total	Of Illegitimate Children	Total	Legitimate	Illegitimate
City of Manchester ...		15,388	697	4·53	1,357	110	88	85	158
I.	Manchester Township	2,931	184	6·28	350	45	119	111	245
II.	North Manchester ..	3,988	118	2·96	342	17	86	84	144
III.	South Manchester ...	8,469	395	4·67	665	48	79	76	121
I.	Ancoats	1,088	54	4·97	120	16	110	101	296
	Central	408	36	8·82	54	7	132	126	194
	St. George's.........	1,435	94	6·55	176	22	123	115	234
II.	Cheetham............	742	31	4·17	74	6	97	96	193
	Crumpsall.....	166	5	3·01	13	1	78	75	200
	Blackley	231	9	3·90	20	2	87	81	222
	Harpurhey	346	9	2·60	18	...	52	53	...
	Moston...............	424	10	2·36	30	1	71	70	100
	Newton Heath......	868	21	2·42	76	2	88	87	95
	Bradford	600	18	3·00	50	4	83	79	22
	Beswick	266	5	1·88	25	...	94	96	...
	Clayton...............	345	10	2·89	36	1	104	104	100
III.	Ardwick	920	39	4·24	82	3	89	90	77
	Openshaw	632	20	3·16	54	4	85	82	200
	Gorton (West)	675	35	5·18	57	3	84	84	86
	Rusholme and Kirk.	672	23	3·42	50	5	74	69	217
	Chorlton-on-Med....	1,212	105	8·66	112	16	92	87	152
	Hulme	1,633	79	4·84	141	8	86	86	101
	Moss Side	554	25	4·51	37	2	67	66	80
	Withington............	1,000	34	3·40	52	2	52	52	59
	Gorton	882	27	3·06	66	...	75	77	...
	Levenshulme	289	8	2·77	14	5	48	32	625

TABLE J, 1923.

INFANTILE MORTALITY IN THE CITY, AND ITS THREE MAIN DIVISIONS.

DEATH-RATES UNDER ONE YEAR PER 1,000 BIRTHS.

CAUSES OF DEATH	City of Manchester	Manchester Township	North Manchester	South Manchester
auses	88·19	119·41	85·76	78·52
les	0·91	0·31	1·25	0·94
ping Cough	4·81	9·21	7·02	2·24
Com: Infectious Diseases†	0·52	1·02	0·50	0·35
hœal Diseases	9·81	18·77	6·02	8·50
rcular Diseases‡	1·88	3·07	1·25	1·77
ulsions	3·38	3·07	2·26	4·01
Nervous Diseases§	1·11	1·37	1·76	0·71
Diseases	24·77	36·51	25·33	20·55
ature Birth......................	18·00	19·79	19·07	16·89
hy, &c. ‖	5·20	8·19	5·02	4·25
ation	0·13	0·34	...	0·12
d dead in bed (overlaid) ...	0·65	1·71	0·50	0·35

hese are Smallpox, Scarlatina, Diphtheria, and various forms of "Fever," including the chief Typhus and Typhoid.

hese are Phthisis, Tubercular Meningitis, Tabes Mesenterica, and General Tuberculosis a).

hese are Meningitis, and other diseases of the Brain and Spinal Cord.

hese are such ill-defined causes as Atrophy, Marasmus, Debility, Inanition &c.

TABLE K, 1923.—CITY OF MANCHESTER. ANNUAL RATES OF MORTALITY PER 1,000 PERSONS LIVING AT ALL AGES, IN THE CITY OF MANCHESTER AND IN ITS STATISTICAL DIVISIONS, FROM CERTAIN DISEASES AND GROUPS OF DISEASES.

CAUSES OF DEATH	City of Manchester	Manchester Township	North Manchester	South Manchester	City of Manchester Average of 10 years 1913-1922
All Causes	13·32	17·99	11·98	12·78	14·72
Smallpox	...	...	...	...	...
Measles	0·11	0·14	0·05	0·13	0·31
Scarlet Fever	0·04	...	0·05	0·05	0·08
Typhus Fever	...	...	...	...	...
Influenza	0·37	0·28	0·25	0·45	0·60
Whooping Cough	0·24	0·65	0·28	0·12	0·21
Diphtheria	0·06	0·10	0·06	0·05	0·11
Ill-defined Fever	...	...	...	...	...
Enteric Fever	0·01	0·00	0·00	0·01	0·03
Diarrhœal Diseases	0·27	0·70	0·16	0·21	0·45
Puerperal Fever	0·03	0·04	0·02	0·03	0·03
Erysipelas	0·02	0·05	0·02	0·02	0·02
Pyæmia, Septicæmia	0·02	0·03	0·01	0·01	0·03
Phthisis (Tuberc: Pulmon:)	1·24	1·83	0·96	1·17	1·44
Tubercular Meningitis	0·13	0·21	0·14	0·10	0·15
Tuberc: Periton: Tabes Mes:	0·07	0·10	0·05	0·06	0·10
Tuberculous Dis: (other)	0·10	0·10	0·10	0·10	0·15
Alcoholism	0·01	0·00	0·00	0·00	0·03
Cancer	1·39	1·51	1·33	1·40	1·10
Rheumatic Fever	0·07	0·08	0·06	0·06	0·07
Premature Birth	0·37	0·53	0·37	0·33	0·44
Nervous Diseases	0·46	0·65	0·41	0·44	0·61
Heart and Blood Vessels Diseases	2·56	2·77	2·37	2·59	2·34
Bronchitis	1·45	2·12	1·25	1·37	1·55
Pneumonia	1·30	2·50	1·16	1·06	1·41
Respiratory Diseases (other)	0·06	0·05	0·05	0·06	0·14
Digestive Organs (Diseases of)	0·52	0·52	0·49	0·53	0·57
Urinary Organs (Diseases of)	0·43	0·54	0·28	0·48	0·50
Old Age	0·56	0·60	0·61	0·53	0·59

Rates per 1,000 births—Puerperal Fever 1·31, Childbirth 2·08

TABLE I., 1923.

ANCHESTER.—Certification of the Causes of Death in the Main Divisions and in Districts.

TISTICAL DIVISIONS.	Total Deaths	Certified by		Not Certified	Proportion per cent. of Deaths		
					Certified by		Not Certified
		Registered Medical Practitioners	Coroner		Regist'd Medical Prac-titioners	Coroner	
y of Manchester	**10,015**	**9,355**	**594**	**66**	**93·4**	**5·9**	**0·7**
Manchester Township...	1,965	1,828	126	11	93·0	6·4	0·6
North Manchester	2,482	2,334	124	24	94·1	5·0	0·9
South Manchester	5,568	5,193	344	31	93·2	6·2	0·6
Ancoats	666	625	37	4	93·8	5·6	0·6
Central	386	345	37	4	89·4	9·6	1·0
St. George's	913	858	52	3	94·0	5·7	0·3
Cheetham	537	505	19	13	94·1	3·5	2·4
Crumpsall	140	135	3	2	96·5	2·1	1·4
Blackley	151	143	7	1	94·7	4·6	0·7
Harpurhey	191	181	7	3	94·7	3·7	1·6
Moston	280	269	11	...	96·1	3·9	...
Newton Heath	540	501	35	4	92·8	6·5	0·7
Bradford	299	275	24	...	92·0	8·0	...
Beswick	154	144	10	...	93·5	6·5	...
Clayton	190	181	8	1	95·3	4·2	0·5
Ardwick	570	536	31	3	94·1	5·4	0·5
Openshaw	426	400	26	...	93·9	6·1	...
Gorton (West)	361	341	20	...	94·5	5·5	...
Rusholme and Kirk. ...	478	442	32	4	92·5	6·7	0·8
Chorlton-upon-Medlock	929	856	66	7	92·2	7·1	0·7
Hulme	934	870	62	2	93·2	6·6	0·2
Moss Side	490	464	21	5	94·7	4·3	1·0
Withington...............	649	593	50	6	91·4	7·7	0·9
Gorton	492	465	23	4	94·5	4·7	0·8
Levenshulme	239	226	13	...	94·6	5·4	...

TABLES.

1924.

TABLE A.—MANCHESTER, 1924.

CAUSES OF DEATH AT DIFFERENT LIFE PERIODS IN THE 53 WEEKS OF THE

PERSONS.—(MALES AND FEMALES.)

CAUSES OF DEATH	Ages at Death											
	All Ages	Under 5 Years		5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 to 75
		0 to 1	1 to 5									
All Causes	10702	1471	1085	176	130	238	226	519	812	1274	1643	1872
A.—General Diseases	4228	804	589	82	78	144	141	277	383	515	581	454
B.—Local Diseases	5685	541	456	72	45	80	71	211	395	711	1004	1288
C.—Other Specified Dis:..	...	...	...	...	...	...	...	...	...	...	...	...
D.—Ill-defined Diseases	475	101	5	...	...	...	1	3	2	4	13	98
E.—Violent Deaths	314	25	35	22	7	14	13	28	32	44	45	32
A.—General Diseases.												
Smallpox.. Vaccinated	...	...	...	...	...	...	...	...	...	...	...	...
Smallpox.. Not Vaccinated	...	...	...	...	...	...	...	...	...	...	...	...
Smallpox.. No Statement	...	...	...	...	...	...	...	...	...	...	...	...
Cowpox	...	...	...	...	...	...	...	...	...	...	...	...
Chickenpox	...	...	...	...	...	...	...	...	...	...	...	...
Measles	370	70	283	17	...	...	...	...	...	...	...	...
Epidemic Rose Rash	2	1	...	1	...	...	...	...	...	...	...	...
Scarlet Fever	32	1	16	9	2	2	2	...	...	...	...	...
Typhus	...	...	...	...	...	...	...	...	...	..	...	...
Plague	...	...	...	...	...	...	...	...	...	...	...	...
Relapsing Fever	...	...	...	...	...	...	...	...	...	...	...	...
Influenza	342	6	21	2	2	2	9	28	38	57	67	71
Whooping Cough	116	37	76	3	...	...	...	...	...	...	...	...
Mumps	3	1	1	...	...	...	...	...	...	...	...	1
Diphtheria	62	5	34	14	8	1	...	...	...	...	...	...
Poliomyelitis	1	...	1	...	...	...	...	...	...	...	...	...
Cerebro-spinal Fever	7	6	...	1	...	...	...	...	...	...	...	...
Simple Cont: Fever	...	...	...	...	...	...	...	...	...	...	...	...
Enteric Fever	14	...	1	1	...	...	...	8	2	1	1	...
Asiatic Cholera	...	...	...	...	...	...	...	...	...	...	...	...
Epidemic Diarrhœa	14	13	1	...	...	...	...	...	...	...	...	...
Diarrhœa	197	150	39	2	1	...	...	...	...	2	...	1
Dysentery	1	...	...	...	...	...	...	...	...	1	...	...
Malarial Fever	2	...	...	...	...	...	...	1	1	...	...	...
Trench Fever	...	...	...	...	...	...	...	...	...	...	...	...
Actinomycosis	...	...	...	...	...	...	...	...	...	...	...	...
Hydrophobia	...	...	...	...	...	...	...	...	...	...	...	...
Glanders	...	...	...	...	...	...	...	...	...	...	...	...
Anthrax	...	...	...	...	...	...	...	...	...	...	...	...
Tetanus	...	...	...	...	...	...	...	...	...	...	...	...
Syphilis	31	22	4	...	1	...	...	1	3	...	...	...
Gonorrhœa, Strict: Urethra	9	...	...	...	...	...	...	...	1	2	4	2
Puerperal.. Septicæmia	21	...	...	...	...	...	2	12	7	...	...	...
Puerperal.. Pyæmia	...	...	...	...	...	...	...	...	...	...	...	...
Puerperal.. Phlegmasia Dol:	...	...	...	...	...	...	...	...	...	...	...	...
Puerperal.. *Fever*	3	...	...	...	...	...	2	1	...	...	...	...
Infective Endocarditis	23	...	...	...	4	3	1	8	3	2	1	1
Epidemic Pneumonia Pneumonic Fever	...	...	...	...	...	...	...	...	...	...	...	...
Erysipelas	21	3	...	...	...	...	1	...	4	5	3	4
Septicæmia (not puerp:)	11	...	...	1	2	2	1	1	1	2	...	1
Pyæmia (not puerp:)	...	...	...	...	...	...	...	...	...	...	...	...
Phlegmon	5	1	1	...	1	...	1	...	...	...	1	...
Phagedæna	...	...	...	...	...	...	...	...	...	...	...	...
Other Septic Diseases	...	...	...	...	...	...	...	...	...	...	...	...
Tubercular Phthisis	818	3	8	4	10	79	90	147	202	170	77	26
Phthisis	88	...	...	...	3	12	7	21	16	18	9	2
Tubercular Meningitis	95	12	46	8	10	12	5	1	1	..	...	...

TABLE A, 1924—*continued.*

CAUSES OF DEATH	All Ages	Under 5 Years: 0 to 1	Under 5 Years: 1 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 to 75	75 to 85	85 and upwards
General Diseases— *continued*														
rcular Peritonitis	41	2	13	4	3	4	6	7	...	1	1	...	...	...
Mesenterica............	4	1	2	1	...	...	...	...	...	...	...	...	...	...
s..................................	2	...	...	...	1	...	...	...	...	1	...	...	...	...
rcle of other organs.........	42	4	5	2	6	5	4	4	3	3	4	1	1	...
ral Tuberculosis	45	5	16	2	3	6	3	1	3	5	1	...	...	...
ıla	...	...	...	...	...	...	...	...	...	...	...	...	...	...
itic Diseases..................	1	...	...	...	...	...	...	...	...	...	1	...	...	...
ation	...	...	...	...	...	...	...	...	...	...	...	...	...	...
y	...	...	...	...	...	...	...	...	...	...	...	..	.	...
olism, Delirium Tremens	7	...	...	...	...	...	...	...	2	2	2	...	1	...
n, Morphia Habit	...	...	...	...	...	...	...	...	...	...	...	...	...	...
aine Poisoning...............	1	...	1	...	...	...	...	...	...	...	...	...	...	...
trial ning { Lead..................	1	...	...	...	...	...	...	...	...	...	1	...	...	...
Phosphorus.........	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Arsenic, &c.	...	...	...	...	...	...	...	...	...	...	...	...	..	...
n: Fever, Acute Rheum:..	54	...	2	5	16	7	2	6	5	5	3	3	...	...
natism of Heart	1	...	...	...	...	...	...	...	1	...	...	...	...	...
ic Rheumatism	35	...	...	1	...	3	...	1	...	5	6	9	9	1
n: Arthritis, Rheum: Gout	43	...	...	...	..	...	...	1	2	4	9	13	13	1
....	2	...	...	...	...	...	...	...	...	2	...	...	...	...
r—Buccal Cavity	64	...	...	...	...	...	...	...	1	16	28	13	4	2
Stomach and Liver......	329	...	...	...	1	...	...	3	23	54	111	103	30	4
eritoneum, Intest., Rectum	208	...	...	...	...	...	...	3	6	33	65	81	16	4
emale Genital Organs ...	114	...	...	...	...	...	1	5	19	35	33	18	3	...
reast.............................	86	...	...	..	...	...	...	2	10	18	34	10	11	1
kin	19	...	...	...	...	...	...	...	...	4	4	7	4	...
thers or unspecified........	230	1	...	1	2	2	2	4	17	45	76	61	17	2
s	13	3	10	...	...	...	...	...	...	...	...	...	...	...
ra	2	...	...	...	...	1	...	1	...	...	...	...	...	...
philia, Hæm: Diathesis	...	...	...	...	...	...	...	...	...	...	...	...	...	...
ia, Leucocythæmia	65	...	1	1	2	2	1	6	8	14	17	7	5	1
es Mellitus..................	68	...	3	...	...	1	1	4	4	8	22	19	6	...
Constitutional Diseases .	...	...	...	...	...	...	...	...	...	...	...	...	...	..
ture Birth	299	299	...	...	...	...	...	...	...	...	...	...	...	..
nital Defects	87	83	2	2	...	...	...	...	...	...	...	...	...	..
at Birth	35	35	...	...	...	...	...	...	...	...	...	..	...	..
asis...............................	20	20	...	...	...	...	...	...	...	...	...	...	...	..
of Breast Milk	...	..	...	...	...	...	...	...	...	...	...	...	...	..
ng	6	4	2	...	...	...	...	...	...	...	...	...	...	...
of Early Infancy.........	16	16	...	...	...	...	...	...	..	...	...	...	...	..
ocal Diseases.														
VOUS SYSTEM.														
mation of Brain............	43	14	17	4	1	...	1	2	1	1	2	...	...	...
ng of Brain	13	...	...	...	...	...	...	...	...	...	3	6	4	...
l Paraly: of Insane......	34	...	...	...	...	...	...	...	6	17	9	2	...	...
y (not puerperal).........	36	1	2	...	...	2	2	2	4	8	11	4	...	...
....	...	...	...	...	...	...	...	...	...	...	...	...	..	..
sy..................................	34	...	2	1	4	2	5	7	2	2	3	2	4	...
sions	81	63	17	...	1	...	...	...	...	...	...	...	...	...
ismus Stridulus......	1	...	1	...	...	...	...	...	...	...	...	...	...	...
otor Ataxy..................	20	...	...	...	...	...	1	..	...	7	8	4	...	..
Spinal Cord...............	50	...	...	...	1	...	1	2	5	10	14	11	6	...
s	4	...	...	...	...	...	...	...	1	1	2	...	...	...
umour	20	...	...	1	2	4	1	1	6	4	1	...	...	...
ncephalitis....................	1	...	...	1	...	...	...	...	...	...	...	...	...	...
alitis Lethargica	52	4	7	4	2	10	2	4	7	6	4	2	..	...
s System (other Dis :)...	32	3	4	3	...	4	...	1	2	5	6	2	2	...
EASES OF SPECIAL SENSE ORGANS.														
Mastoid Disease	27	3	4	2	...	3	3	5	3	1	2	1	...	...
is, Nose Disease	...	...	...	...	...	...	...	...	...	...	..	...	...	..
lmia, Eye Disease	2	1	...	...	...	...	...	...	...	...	..	1	..	...

ABLE A, 1924—*continued.*

CAUSES OF DEATH	All Ages	Under 5 Years 0 to 1	Under 5 Years 1 to 5	Ages at Death 5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 to 75
3. DISEASES OF HEART.												
Valvular Dis : Endocarditis	491	1	1	1	8	13	10	43	61	95	114	104
Pericarditis	11	...	3	...	...	1	1	...	3	2	...	1
Hypertrophy of Heart............	1	...	...	...	...	...	...	...	...	1	...	...
Angina Pectoris	35	...	...	...	...	...	...	...	...	11	11	8
Dilatation of Heart	80	...	...	...	...	...	..	2	2	14	23	22
Fatty Degen : of Heart	26	...	...	...	...	...	...	...	2	6	11	6
Syncope, Heart Disease.........	479	1	2	...	1	2	3	8	35	62	91	164
4. DIS : OF BLOOD VESSELS.												
Cerebral Hæmorrhage............	388	6	...	...	1	...	1	3	16	44	89	162
Apoplexy, Hemiplegia.............	85	...	...	...	...	...	...	...	1	5	19	41
Aneurism	16	...	...	...	...	...	...	...	1	6	7	2
Senile Gangrene	13	...	...	...	...	...	...	...	...	...	1	2
Embolism, Thrombosis	57	...	...	...	...	1	...	3	5	5	15	18
Phlebitis......................	4	...	...	...	...	...	..	...	1	1	...	2
Varicose Veins	...	...	...	...	...	...	...	...	...	...	...	...
Blood Vessels (Other Diseases)	355	...	...	...	...	...	...	1	5	22	74	135
5. DIS : OF RESPIRATORY SYS :												
Laryngitis	6	2	3	1	...	...	...	...	...	...	...	...
Memb: Laryng: (Not Diphth:)	...	...	...	...	...	...	...	...	...	...	...	...
Croup..................	1	...	1	...	...	...	...	...	...	...	...	...
Larynx (Other Dis :)	1	...	...	...	...	...	...	...	...	1	...	...
Bronchitis	1,234	135	62	4	4	1	7	15	43	114	213	358
Pneumonia { Lobar-Croupous.	367	19	50	11	2	12	12	41	51	73	53	34
Pneumonia { Broncho-Lobular.	632	223	245	16	3	4	2	9	19	23	30	37
"*Pneumonia*"........................	24	3	3	...	...	...	...	2	1	3	5	6
Emphysema, Asthma	37	...	...	...	...	...	...	...	4	9	8	12
Pleurisy	27	...	8	...	1	2	1	...	4	1	4	4
Fibroid Disease of Lung........	3	...	...	...	...	...	...	...	...	1	1	1
Respiratory Dis: (Other)	42	1	2	1	...	...	...	...	3	10	5	8
6. DIS: OF DIGESTIVE SYS:												
Tonsillitis, Quinsy	3	2	...	1	...	...	...	...	...	...	...	...
Mouth, Pharynx	1	...	1	...	...	...	...	...	...	...	...	...
Gastric Ulcer..........................	52	...	...	...	...	...	...	6	12	17	9	7
Gastric Catarrh.......................	1	...	...	...	...	...	...	...	...	...	...	1
Stomach (Other Dis:)............	34	16	3	1	...	1	...	1	1	4	4	...
Enteritis.................................	3	...	1	...	...	...	...	...	...	...	...	2
Gastro-Enteritis......................	8	...	1	...	...	...	...	...	...	1	...	2
Appendicitis, Perityph :	43	...	2	5	1	6	5	3	7	8	5	1
Hernia	31	2	...	...	...	...	...	...	2	6	10	5
Intestinal Obstruct:................	37	8	2	1	...	2	1	3	2	1	4	8
Other Diseases of Intestines ...	14	3	...	...	1	1	1	4	...	1	3	...
Peritonitis	22	1	1	1	2	1	...	1	6	4	3	1
Cirrhosis of Liver..................	34	1	...	1	...	...	...	...	2	12	11	7
Liver	20	4	1	...	...	...	...	1	1	2	3	4
Biliary Calculi	23	...	...	...	...	...	...	1	3	7	8	3
Digestive System (Other Dis:)...	13	2	1	...	...	1	1	1	2	2	2	...
7. DIS : OF LYMPHATIC AND DUCTLESS GLANDS.												
Spleen, Disease of.................	...	...	...	...	...	...	...	...	...	...	...	...
Lymphat: Syst: (Other Dis:)...	14	4	1	1	...	1	1	2	...	4	...	...
Thyroid Body (Other Dis:) ...	5	...	...	...	1	1	...	...	...	1	2	...
Addison's Dis : (Dis: of)	2	...	...	...	...	...	...	...	1	...	...	1
8. DISEASES OF URINARY SYSTEM.												
Nephritis Ac: Uræmia	51	2	3	6	1	1	2	5	10	7	6	5
Ch : Bright's Dis : Albumin : ...	222	1	1	...	3	3	5	9	21	40	69	50
Calculus	2	...	...	...	...	...	...	...	...	...	...	2
Bladder and Prostate Dis : ...	62	...	...	...	...	...	...	1	1	5	16	20
Urinary Syst : (Other Dis :) ...	13	...	...	...	1	...	...	...	...	5	5	2

TABLE A, 1924—*concluded.*

AUSES OF DEATH	All Ages	AGES AT DEATH												
		UNDER 5 YEARS		5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 to 75	75 to 85	85 and upwards
		0 to 1	1 to 5											
SEASES OF GENERATIVE SYSTEM.														
an Tumour	6	...	...	...	...	...	...	...	...	3	1	1	1	...
Dis: of Ovary	...	...	...	...	...	...	...	...	...	...	...	...	...	...
e Tumour	5	...	...	...	...	...	...	...	...	4	1	...	...	...
Dis: of Uterus and Vagina	6	...	...	...	...	...	...	2	2	2	...	...	...	...
: of Menstruation	...	...	...	...	...	...	...	...	...	...	...	...	...	...
: and Mam: Orgs: (other)	3	...	...	...	...	...	1	1	...	...	1	...	...	...
ISEASES OF PREGNANCY AND CHILDBIRTH.														
on, Miscarriage	4	...	...	...	...	...	...	1	3	...	...	...	...	...
ral Mania	1	...	...	...	...	...	...	...	1	...	...	...	...	...
ral Convulsions	5	...	...	...	...	...	...	2	2	1	...	...	...	...
ta Præv: Flooding	2	...	...	...	...	...	...	...	2	...	...	...	...	...
Ac: of Preg: & Childbirth	27	...	...	...	...	...	1	13	12	1	...	...	...	...
SEASES OF LOCOMOTOR SYSTEM.														
Necrosis	1	...	...	...	...	...	...	...	...	...	...	...	1	...
is, Periostitis	10	1	...	2	4	...	...	...	1	...	...	1	...	1
otor Sys: (Other)	12	...	3	2	...	...	...	1	2	...	2	1	1	...
SEASES OF THE SKIN.														
Bedsore	3	...	...	...	...	...	...	1	...	1	...	1	...	...
	1	1	...	...	...	...	...	...	...	...	...	...	...	...
igus	12	10	1	...	...	...	...	...	1	...	...	...	...	...
iseases (other)	12	3	...	1	...	1	...	1	4	1	...	1	...	...
her Specified Diseases	...	...	...	...	...	...	...	...	...	...	...	...	...	...
-defined and not Speci- Diseases.														
y, Debility	105	99	4	...	...	...	...	1	...	...	...	1	...	...
e	353	...	...	...	...	...	...	...	...	...	12	94	185	62
, Ascites, Anasarca	...	...	...	...	...	...	...	...	...	...	...	...	...	...
r	10	...	...	...	...	...	...	...	2	3	1	3	1	...
s	5	2	1	...	...	...	1	1	...	...	...	...	...	...
rrhage	...	...	...	...	...	...	...	...	...	...	...	...	...	...
(cause unascertained)	...	...	...	...	...	...	...	...	...	...	...	...	..	...
ll-defined	2	...	...	...	...	...	...	1	...	1	...	...	...	...
—Violent Deaths.														
IDENT.														
es and Quarries	3	...	...	...	...	1	...	...	1	...	1	...	...	...
icles On Railways	5	...	...	...	...	...	...	1	1	1	2	...	...	...
In Streets	62	...	7	10	4	4	4	4	5	10	7	5	2	...
Boats, Docks (not wning)	2	...	...	...	...	...	...	1	...	1	...	...	...	...
g Operations	2	...	...	...	...	1	...	...	1	...	...	...	...	...
ery	4	...	...	...	...	1	...	1	1	1	...	...	...	...
ns and Implements	1	...	...	...	...	...	...	1	...	...	...	...	...	...
nd Scalds	45	2	21	5	...	1	1	1	4	3	1	4	2	...
Poisonous Vapours	12	...	...	...	1	1	...	3	1	2	4	...	...	...
ng	23	...	4	2	1	...	1	1	3	5	4	2	...	...
ion	24	21	...	...	...	1	...	...	1	1	...	...	...	...
	51	1	2	2	...	1	1	1	2	4	12	13	10	2
r Agencies	...	...	...	...	...	...	...	...	...	...	...	...	...	...
se or not Stated	19	...	1	3	1	2	2	3	3	1	2	1	...	...
ICIDE.	4	1	...	...	...	...	...	2	...	...	...	...	1	...
IDE.	56	...	...	...	...	1	4	8	9	15	12	7	...	..
CUTION.	1	...	...	...	...	...	...	1	...	...	...	...	...	...

TABLE B.—MANCHESTER, 1924.

Causes of Deaths at Different Life Periods—MALES.

Classes	CAUSES OF DEATH	All Ages Total	Ages at Death—in years										
			Under 5 Years		5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 to 75
			0 to 1	1 to 5									
	All Causes	5583	823	584	107	73	125	114	235	436	740	915	93
A	Smallpox	...	...	...	...	...	...	...	...	...	...	...	...
	Measles	188	37	145	6	...	...	...	...	...	...	...	...
	Scarlet Fever	15	1	7	3	2	2	...	...	...	...	...	...
	Typhus Fever	...	...	...	...	...	...	...	...	...	...	...	...
	Whooping Cough	54	19	34	1	...	...	...	...	...	...	...	...
	Diphtheria	29	4	14	7	4	...	...	...	...	...	...	...
	Ill-defined Fever	...	...	...	...	...	...	...	...	...	...	...	...
	Enteric Fever	7	...	1	1	...	...	...	3	1	1	...	...
	Influenza	165	3	9	...	...	2	5	10	24	25	40	35
	Epidemic Diarrhœa	8	7	1	...	...	...	...	...	...	...	...	...
	Diarrhœa, Dysentery, Simple Cholera	121	98	19	2	...	...	...	...	...	2	...	...
	Venereal Affections	28	14	1	...	1	...	...	1	3	2	4	2
	Erysipelas	11	1	...	...	...	...	1	...	3	2	2	1
	Pyæmia, Septicæmia (others)	7	...	...	1	2	1	...	1	...	2	...	..
	Other Zymotics	23	4	3	2	4	1	1	3	3	...	1	1
	Tuberc. Periton: Tabes Mes:	22	...	10	5	1	2	1	2	...	1	...	...
	Tubercular Meningitis	5[illegible]	8	29	4	6	5	3	...	...	...	...	...
	Phthisis	553	1	5	2	5	38	46	87	144	144	59	20
	Tuberculous Dis. (other)	47	6	6	2	9	6	3	3	2	7	3	...
	Parasitic Diseases	1	...	...	...	...	...	...	...	...	...	1	...
	Alcoholism	6	...	...	...	...	...	...	...	1	2	2	...
	Rheumatic Fever	26	...	2	1	11	4	...	2	1	3	1	1
	Cancer	523	1	...	1	2	2	1	3	30	99	189	153
	Premature Birth	148	148	...	...	...	...	..	...	...	...	...	...
	Congenital Defects	50	46	2	2	..	...	...	...	...	...	...	...
	Atelectasis	11	11	...	...	...	...	...	...	...	...	...	...
B and C	Epilepsy	23	..	2	1	...	2	3	5	2	2	2	2
	Convulsions	46	34	11	...	1	...	...	...	...	...	...	...
	Nervous Syst: (other)	176	7	22	7	3	12	6	3	17	37	42	15
	Cereb: Haem: Apoplexy, Hemip:	211	4	...	...	1	...	..	2	9	24	48	84
	Heart and Blood Vessel Dis:	749	1	3	...	5	8	5	22	50	118	182	236
	Pleurisy	19	...	4	...	...	1	1	...	4	1	3	4
	Croup	...	...	...	...	...	...	...	...	...	...	...	...
	Bronchitis	620	78	40	3	3	1	2	10	23	78	113	16
	Pneumonia	602	138	166	18	4	14	9	31	48	71	54	39
	Respiratory Dis: (other)	38	2	4	2	...	...	...	...	1	13	3	8
	Cirrhosis	19	...	...	...	...	...	...	...	2	6	6	5
	Digestive Syst: (other)	144	28	4	6	1	7	5	8	1[illegible]	22	24	14
	Urinary Syst: (other)	215	1	2	3	1	3	5	9	15	28	68	49
	Generative Organs	...	..	...	...	...	...	...	...	...	...	...	...
	Other specified Diseases	178	46	14	7	2	3	5	11	10	15	26	26
D	Marasmus and Atrophy	63	62	1	...	...	...	..	...	...	...	..	...
	Old Age	147	...	...	...	...	...	...	...	...	...	6	46
	Other Ill-defined Causes	6	...	...	...	...	...	1	1	1	2	1	...
E	Violence	182	12	23	20	5	10	8	13	17	21	25	18
	Homicide	2	1	...	...	...	...	...	...	...	...	...	..
	Suicide	45	...	...	...	...	1	3	5	7	12	10	7

TABLE C.—MANCHESTER, 1924.

CAUSES OF DEATHS AT DIFFERENT LIFE PERIODS—FEMALES.

CAUSES OF DEATH	All Ages Total	AGES AT DEATH—IN YEARS											
		UNDER 5 YEARS											
		0 to 1	1 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 to 75	75 to 85	85 and upwards
All Causes	5119	648	501	69	57	113	112	284	376	534	728	939	619	139
Smallpox	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Measles	182	33	138	11	...	...	...	...	...	...	...	...	...	...
Scarlet Fever	17	...	9	6	...	...	2	...	...	...	...	...	...	...
Typhus Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Whooping Cough	62	18	42	2	...	...	...	...	...	...	...	...	...	...
Diphtheria	33	1	20	7	4	1	...	...	...	..	...	...	...	..
Ill-defined Fever	...	...	...	...	...	...	...	..	...	...	...	...	...	...
Enteric Fever	7	...	...	...	..	...	...	5	1	..	1	...	...	...
Influenza	177	3	12	2	2	...	4	18	14	32	27	36	24	3
Epidemic Diarrhœa	6	6	...	...	...	...	...	...	...	...	...	...	...	...
Diarrhœa, Dysentery, Simple Cholera	77	52	20	...	1	...	...	...	...	1	...	1	1	1
Venereal Affections	12	8	3	...	...	...	...	...	1	...	...	...	...	...
Erysipelas	10	2	...	...	...	...	...	...	1	3	1	3	...	...
Pyæmia, Septicæmia (others)	4	...	...	...	...	1	1	...	1	...	...	1	...	...
Puerperal Fever	24	...	...	...	...	...	4	13	7	...	...	...	...	...
Other Zymotics	20	5	...	...	1	2	1	6	1	2	1	1	...	...
Tubercular Periton : Tabes Mes.	23	3	5	...	2	2	5	5	...	...	1	...	...	...
Tubercular Meningitis	40	4	17	4	4	7	2	1	1	...	...	...	...	...
Phthisis	353	2	3	2	8	53	51	81	74	44	27	8	...	...
Tuberculous Diseases (other)	42	3	15	2	1	5	4	2	4	2	2	1	1	...
Parasitic Diseases	...	...	...	...	...	...	..	...	...	...	...	...	...	...
Alcoholism	1	...	...	...	...	...	...	...	1	...	...	...	...	...
Rheumatic Fever	28	...	...	4	5	3	2	4	4	2	2	2	...	...
Cancer	527	...	...	...	1	...	2	14	46	106	162	140	46	10
Premature Birth	151	151	...	...	...	...	...	...	...	...	...	...	...	...
Congenital defects	37	37	...	...	...	...	...	...	...	...	...	...	...	...
Atelectasis	9	9	...	...	...	...	..	...	...	...	...	...	...	..
Epilepsy	11	...	...	...	4	...	2	2	...	...	1	...	2	...
Convulsions	35	29	6	...	...	...	...	...	...	...	...	...	...	...
Nervous System (other)	130	15	9	6	3	8	2	9	15	22	18	16	7	...
Cerebral Hæmorrhage, Apoplexy and Hemiplegia	262	2	...	...	...	...	1	1	8	25	60	119	40	6
Heart and Blood Vessel Diseases	819	1	3	1	4	9	9	35	65	107	165	228	160	32
Pleurisy	8	...	4	.	1	1	...	...	...	...	1	...	1	...
Croup	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Bronchitis	614	57	22	1	1	...	5	5	20	36	100	191	143	33
Pneumonia	421	107	132	9	1	2	5	21	23	28	34	38	20	1
Respiratory Diseases (other)	52	1	2	...	...	...	...	...	6	8	11	13	8	3
Cirrhosis	15	1	...	1	...	...	...	...	...	6	5	2	...	...
Digestive System (other)	161	10	9	3	3	5	3	13	18	31	27	20	18	1
Urinary System (other)	135	2	2	3	4	1	2	6	17	29	28	30	9	2
Generative Organs and Childbirth	59	...	...	...	...	...	2	19	22	11	3	1	1	...
Other specified Diseases	218	37	13	3	5	10	1	12	17	26	35	32	23	4
Marasmus and Atrophy	42	37	3	...	...	...	...	1	...	...	...	1	...	...
Old Age	206	...	...	...	...	...	...	...	...	...	6	48	109	43
Other Ill-defined Causes	4	...	..	...	...	...	...	1	1	2	...	...	...	...
Violence	72	12	12	2	2	3	1	5	6	8	8	7	6	...
Homicide	2	...	...	...	...	...	...	2	...	...	...	...	...	...
Suicide	11	...	...	...	...	...	1	3	2	3	2	...	...	...

TABLE D.

CITY OF MANCHESTER, 1924.—CAUSES OF DEATH IN INFANCY AND CHILDHOOD.

CAUSES OF DEATH	UNDER ONE YEAR			Total under One Year	ONE AND UNDER FIVE YEARS			
	Under 3 months	3–6 months	6–12 months		1–	2–	3–	4–
All Causes	**779**	**236**	**456**	**1,471**	**630**	**224**	**121**	**110**
Chicken Pox	...	...	...	...	...	...	...	...
Measles	2	5	63	70	168	62	25	28
Scarlatina	...	...	1	1	3	7	3	3
Whooping Cough	4	8	25	37	48	11	9	8
Diphtheria	...	1	4	5	11	10	5	8
Erysipelas	...	1	2	3	...	...	...	...
Diarrhœal Diseases	55	53	55	163	35	4	...	1
Gastritis	9	5	2	16	2	...	1	...
Syphilis	14	7	1	22	4	...	...	...
Tabes Mesenterica and Tuberc. Peritonitis	...	2	1	3	9	2	1	3
Tubercular Meningitis	...	5	7	12	15	14	11	6
Tuberculosis (other)	2	3	7	12	12	9	3	5
Rickets	...	...	3	3	9	1	...	...
Premature Birth	298	1	...	299	...	...	...	...
Injury at Birth	35	...	...	35	...	...	...	...
Atelectasis	20	...	...	20	...	...	..	...
Congenital Malformations	61	9	13	83	1	...	1	...
Convulsions	42	12	9	63	14	3	...	...
Meningitis	4	3	7	14	9	2	1	5
Nervous Diseases (other)	...	1	7	8	7	2	5	2
Bronchitis	50	30	55	135	43	10	3	6
Pneumonia	39	53	153	245	200	58	29	11
Other Respiratory Diseases	2	1	...	3	6	4	1	3
Atrophy, Marasmus	67	23	9	99	4	...	...	...
Found Dead in Bed (overlaid)	14	1	...	15	...	...	...	...
Suffocation	6	...	...	6	...	...	...	...
Violence (other forms)	...	...	4	4	7	10	9	9
Ill-defined Causes	...	...	...	...	...	..	...	...
Unclassified	55	12	28	95	23	15	14	12

G, 1924.—Population, Area, Density. Total Births and Deaths, with Birth and Death Rates.

[Institution Populations, Births and Deaths, distributed.]

TATISTICAL DIVISIONS	Estimated Population	Area in Acres	Persons to an Acre	BIRTHS Total	BIRTHS Rate per 1,000	DEATHS Total	DEATHS Rate per 1,000	Natural Rate of Increase	Mean Death Rate 1914-1923
Manchester	**755,119**	**21,690**	**35**	**14,691**	**19·15**	**10,702**	**13·95**	**5·20**	**14·47**
chester Township......	108,558	1,646	66	2,774	25·16	2,100	19·04	6·12	21·89
h Manchester	208,020	8,033	26	3,806	18·01	2,613	12·37	5·64	12·47
h Manchester	438,541	12,011	37	8,111	18·21	5,989	13·44	4·77	13·71
ats	39,728	399	100	1,018	25·23	826	20·47	4·76	21·53
ral	18,466	745	25	416	22·18	422	22·50	0·32	22·64
George's	50,364	502	100	1,340	26·19	852	16·65	9·54	21·50
tham	43,144	919	47	672	15·33	516	11·77	3·56	11·40
psall	12,827	2,212	6	169	12·97	156	11·97	1·00	11·69
ley	13,727	1,080	13	261	18·72	172	12·34	6·38	11·23
urhey	18,024	193	93	328	17·92	235	12·84	5·08	13·47
on	26,144	1,299	20	398	14·99	289	10·88	4·11	9·77
on Heath	41,252	1,341	31	814	19·43	514	12·27	7·16	13·78
ford	26,982	288	93	580	21·16	362	13·21	7·95	14·43
ick	11,109	96	115	248	21·98	176	15·60	6·38	14·89
on	14,811	605	24	336	22·34	193	12·83	9·51	12·56
ick	41,152	509	81	902	21·58	588	14·07	7·51	15·23
shaw	33,196	581	57	599	17·76	423	12·54	5 22	13·78
on (West)	29,477	318	92	652	21·78	395	13·19	8·59	15·26
olme and Kirk.	42,573	1,412	30	608	14·06	443	10·24	3·82	10·01
ton-upon-Med.	60,943	647	94	1,227	19·82	1,088	17·58	2·24	18·31
e	65,308	477	137	1,554	23·43	1,173	17·69	5·74	18·40
Side	36,445	421	86	459	12·40	432	11·67	0·73	12·30
ngton	63,748	5,899	11	939	14·50	625	9·70	4·80	10·30
on	43,758	1,141	38	894	20·11	594	13·37	6·74	11·45
nshulme	21,941	606	36	277	12·43	228	10·23	2·20	9·66

TABLE H, 1924.

Births Registered in the City of Manchester, in its Main Di
and in Districts; Distinguishing Legitimate and Illegitimate B
also the Proportion of Mortality among Infants of both Classes
One Year of Age.

	STATISTICAL DIVISIONS	BIRTHS		Percentage of Illegitimate Births to Total Births	DEATHS UNDER 1 YEAR		PROPORTION OF DEATHS UNDER 1 YEAR PER 1,000 BIRTHS		
		Total	Illegitimate		Total	Of Illegitimate Children	Total	Legitimate	Illegitimate
	City of Manchester ...	**14,691**	**652**	**4·4**	**1,471**	**127**	**100**	**96**	**195**
I.	Manchester Township	2,774	159	5·7	358	39	129	122	245
II.	North Manchester ...	3,806	96	2·5	345	22	91	87	229
III.	South Manchester ...	8,111	397	4·9	768	66	95	91	166
I.	Ancoats	1,018	56	5·5	150	17	147	138	303
	Central	416	36	8·7	54	6	130	126	167
	St. George's.........	1,340	67	5·0	154	16	115	108	239
II.	Cheetham............	672	26	3·9	55	7	82	74	269
	Crumpsall......	169	5	3·0	12	1	71	67	200
	Blackley	261	4	1·5	23	...	88	89	...
	Harpurhey	328	10	3·1	23	4	70	60	400
	Moston................	398	6	1·5	40	1	101	100	166
	Newton Heath......	814	18	2·2	68	5	84	79	278
	Bradford	580	20	3·5	68	2	117	118	100
	Beswick	248	3	1·2	21	...	85	86	...
	Clayton...............	336	4	1·2	35	2	104	99	500
III.	Ardwick	902	37	4·1	100	6	111	109	162
	Openshaw	599	20	3·3	57	7	95	86	350
	Gorton (West)	652	22	3·4	62	1	95	97	45
	Rusholme and Kirk.	608	28	4·6	41	3	67	65	107
	Chorlton-on-Med. ...	1,227	117	9·5	146	25	119	109	214
	Hulme	1,554	76	4·9	187	14	120	117	184
	Moss Side	459	25	5·4	32	4	70	64	160
	Withington............	939	32	3·4	42	...	45	46	...
	Gorton	894	27	3·0	76	4	85	83	148
	Levenshulme.........	277	13	4·7	25	2	90	87	154

TABLE J, 1924.

INFANTILE MORTALITY IN THE CITY, AND ITS THREE MAIN DIVISIONS.

DEATH RATES UNDER ONE YEAR PER 1,000 BIRTHS.

CAUSES OF DEATH	City of Manchester	Manchester Township	North Manchester	South Manchester
uses	100·13	129·06	90·65	94·69
es	4·77	9·37	4·20	3·45
ing Cough	2·52	3·25	0·79	3·08
Com: Infectious Diseases†	0·61	0·36	0·79	0 62
œal Diseases	11·10	16·58	11·04	9·25
ular Diseases‡	1·84	2·52	1·58	1·73
sions	4·29	2·52	3·15	5·42
Nervous Diseases§	1·50	1·44	1·31	1·60
iseases	26·07	34·25	21·54	25·40
ure Birth....................	20·35	26·32	19·71	18·62
y, &c. ‖	6·74	9·37	8·67	4·93
tion	0·41	0·72	...	0·49
dead in bed (overlaid) ...	1·02	1·44	0·79	0·99

ese are Smallpox, Scarlatina, Diphtheria, and various forms of "Fever," including the chief Typhus and Typhoid.

ese are Phthisis, Tubercular Meningitis, Tabes Mesenterica, and General Tuberculosis

ese are Meningitis, and other diseases of the Brain and Spinal Cord.

ese are such ill-defined causes as Atrophy, Marasmus, Debility, Inanition, &c.

TABLE K, 1924.—City of Manchester. Annual Rates of Mortali per 1,000 Persons living at all ages, in the City of Manchest and in its Statistical Divisions, from certain Diseases a Groups of Diseases.

Causes of Death	City of Manchester	Manchester Township	North Manchester	South Manchester	City of Manchest Average 10 years 1914-192
All Causes	13·95	19 09	12·37	13·45	14·47
Smallpox	...	...	...	...	...
Measles	0·48	1·11	0·42	0·36	0·28
Scarlet Fever	0·04	0·04	0·03	0·05	0·07
Typhus Fever	...	...	...	...	...
Influenza	0·45	0·47	0·34	0·49	0·63
Whooping Cough	0·15	0·17	0·13	0·15	0·21
Diphtheria	0·08	0·07	0·07	0·09	0·1
Ill-defined Fever	...	...	...	...	...
Enteric Fever	0·02	0·05	0·01	0·02	0·02
Diarrhœal Diseases	0·28	0·51	0·25	0·23	0·39
Puerperal Fever	0·03	0·06	0·03	0·03	0·03
Erysipelas	0·03	0·02	0·02	0·03	0·0
Pyæmia, Septicæmia	0·01	0·01	0·02	0·01	0·0
Phthisis (Tuberc: Pulmon:)	1·18	1·98	1·07	1·03	1·4
Tubercular Meningitis	0·12	0·15	0·10	0·13	0·1
Tuberc: Periton: Tabes Mes:	0·06	0·06	0·07	0·05	0·0
Tuberculous Dis: (other)	0·12	0·24	0·09	0·10	0·14
Alcoholism	0·01	0·01	0·01	0·01	0·0
Cancer	1·37	1·64	1·18	1·39	1·14
Rheumatic Fever	0·07	0·07	0·06	0·07	0·07
Premature Birth	0·39	0·66	0·35	0·34	0·43
Nervous Diseases	0·55	0·60	0·45	0·58	0·58
Heart and Blood Vessels Diseases	2·65	2·70	2·58	2·67	2·37
Bronchitis	1·61	2·38	1·35	1·54	1·56
Pneumonia	1·33	2·28	0·97	1·28	1·38
Respiratory Diseases (other)	0·15	0·17	0·16	0·14	0·13
Digestive Organs (Diseases of)	0·44	0·53	0·44	0·42	0·54
Urinary Organs (Diseases of)	0·46	0·51	0·39	0·48	0·50
Old Age	0·46	0·63	0·52	0·40	0·59

Rates per 1,000 births—Puerperal Fever 1·63, Childbirth 2 66

TABLE L, 1924.

NCHESTER.—Certification of the Causes of Death in the Main Divisions and in Districts.

ISTICAL DIVISIONS.	Total Deaths	Certified by		Not Certified	Proportion per cent. of Deaths		
					Certified by		Not Certified
		Registered Medical Practitioners	Coroner		Regist'd Medical Prac-titioners	Coroner	
of Manchester	**10,702**	**10,040**	**597**	**65**	**93·8**	**5·6**	**0·6**
lanchester Township...	2,100	1,948	147	5	92·8	7·0	0·2
orth Manchester	2,613	2,466	137	10	94·4	5·2	0·4
outh Manchester	5,989	5,626	313	50	94·0	5·2	0·8
Ancoats	826	766	59	1	92·8	7·1	0·1
Central	422	377	42	3	89·3	10·0	0·7
St. George's	852	805	46	1	94·5	5·4	0·1
Cheetham	516	486	26	4	94·2	5·0	0 8
Crumpsall	156	153	3	...	98·1	1·9	...
Blackley	172	161	10	1	93·6	5·8	0·6
Harpurhey	235	224	10	1	95·3	4·3	0·4
Moston	289	279	9	1	96·6	3·1	0·3
Newton Heath	514	485	28	1	94·4	5·4	0·2
Bradford	362	336	25	1	92·8	6·9	0·3
Beswick	176	163	12	1	92·6	6·8	0·6
Clayton	193	179	14	...	92·8	7·2	...
Ardwick	588	560	25	3	95·2	4·3	0·5
Openshaw	423	390	31	2	92·2	7·3	0·5
Gorton (West)	395	372	22	1	94·1	5·6	0·3
Rusholme and Kirk. ...	443	417	19	7	94·1	4·3	1·6
Chorlton-upon-Medlock	1088	999	77	12	91·8	7·1	1·1
Hulme	1173	1121	47	5	95·5	4·1	0·4
Moss Side	432	403	24	5	93·2	5·6	1·2
Withington	625	595	26	4	95·2	4·2	0·6
Gorton	594	561	31	2	94·5	5·2	0·3
Levenshulme	228	208	11	9	91·3	4·8	3·9

NOTIFIABLE INFECTIOUS DISEASES OTHER THAN WHOOPING COUGH AND TUBERCULOSIS.

The diseases included in the Infectious Disease (Notification) Acts, 1889 and 1
regulations under the Public Health Acts, are as follows: Smallpox, Scarlet
Diphtheria, Typhus Fever, Enteric or Typhoid Fever, Relapsing Fever, Continue
Puerperal Fever, Erysipelas, and Asiatic Cholera, to which have been added Oph
Neonatorum, Cerebro-Spinal Fever, Poliomyelitis, Polio-Encephalitis and Ence
Lethargica, Malaria, Dysentery, Trench Fever, Acute Primary Pneumonia, an
Influenzal Pneumonia. The following cases were notified in 1924, and the num
compared with the average of the previous ten years :—

	1914	1915	1916	1917	1918	1919	1920	1921	1922	1923	M
Smallpox	..	..	..	..	..	14	4	..	4	..	
Chickenpox ..	..	..	..	..	..	1,153	1,936	2,443	2,860	3,354	2
Scarlet Fever ..	4,712	2,922	1,185	829	779	1,758	3,829	5,400	3,618	1,814	2
Diphtheria	746	548	614	581	518	471	914	1,002	806	536	
Typhus Fever ..	1	..	..	1	..	..	..	..	..	..	
Enteric Fever ..	156	174	78	86	68	90	54	74	36	50	
Relapsing Fever .	..	..	..	..	..	..	..	..	..	..	
Puerperal Fever .	104	94	99	54	66	159	146	138	130	130	
Erysipelas	551	492	320	228	243	392	382	385	379	294	
Ophthalmia Neonatorum	414	414	379	315	307	344	392	227	263	227	
Cerebro-Spinal Fever	2	15	7	7	5	11	11	3	8	3	
Poliomyelitis ..	12	8	9	14	10	8	7	7	7	4	
Polio-Encephalitis	..	..	..	..	..	4	1	..	..	..	
Encephalitis-Lethargica	..	..	..	..	..	10	31	19	9	38	
Malaria	..	..	..	..	..	312	172	38	19	16	
Dysentry	..	..	..	..	..	6	9	8	3	2	
Trench Fever ..	..	..	..	..	..	1	1	1	1	..	
Primary Pneumonia	..	..	..	..	..	410	620	1,578	2,268	2,067	
Influenzal Pneumonia	..	..	..	..	..	816	205	218	487	426	
Measles	..	..	9,230	10,613	8,448	8,420	10,635	1,135	19,614	3,481	
Rubeola	..	..	1,262	621	675	186	179	453	177	94	
	6,698	4,667	13,183	13,319	11,119	14,565	19,528	13,129	30,689	12,536	1

In 1900 Erysipelas was made notifiable, in 1910 Ophthalmia Neonatorum, in 191
Spinal Fever and Poliomyelitis, and in 1919 the diseases which first appear under t
Measles were made notifiable in 1916, as was also Rubeola.

The deaths from the more common diseases are shown in the following igures :—

s	Measles	Scarlet Fever	Diphtheria	Enteric Fever	Influenza	Whooping Cough	Diarrhœa	Phthisis
-22 ge	229	60	79	21	465	156	337	1090
3	83	31	47	9	281	184	200	931
4	370	32	62	14	342	116	211	906

SMALLPOX.

No cases of smallpox were notified during the years 1923-1924.

CHICKENPOX.

Chickenpox was made a notifiable disease on September 15th, 1919, for ix months, and its notifiability has been renewed from time to time since hat date.

Chickenpox.—Number of Attacks at difference Ages.

	1923	1924
Under 1 year	160	198
1—2 years..	166	210
2—3 „	304	247
3—4 „	349	359
4—5 „	365	494
5—9 „	1,765	1,781
10—14 „	194	227
15—19 „	22	31
20—24 „	10	11
25—44 „	17	15
45 + „	2	1
Total	3,354	3,574

SCARLET FEVER.

The following figures show the course of the disease in quarters :—

Table 1.—Scarlet Fever.—Attacks in Quarters according to Da
of Rash.

Year	First Quarter	Second Quarter	Third Quarter	Fourth Quarter	Total
1918 ..	263	187	153	176	779
1919 ..	132	271	437	918	1758
1920 ..	735	654	907	1533	3829
1921 ..	1124	890	1161	2225	5400
1922 ..	1104	1022	654	838	3618
Mean ..	840	756	828	1423	3847
1923 ..	528	516	385	385	1814
1924 ..	253	305	500	726	1784

This table shows that the periodic wave is declining.

During 1923 the rate of attack from scarlet fever was lower than in towns used for comparison, and was highest in South Manchester.

Table 3.—1923—Scarlet Fever Attacks in Districts, with Att
Rate, Case Fatality per cent., and Removals to Hospital per cen

	Districts	Attacks	Attack Rate per 1,000 Living	† Case Fatality per cent.	Removal Hospit per cen
Manchester Township	Ancoats	53	1·33	1·9	92·4
	Central	40	2·13	...	97 5
	St. George's	71	1·40	...	92·9
North Manchester	Cheetham	100	2·32	2·0	75·0
	Crumpsall	26	2·04	. ...	42·3
	Blackley	50	3·69	4·0	62·0
	Harpurhey	35	1·95	5 7	45·7
	Moston	90	3·47	1·1	62·2
	Newton Heath ..	85	2·06	1·2	80·0
	Bradford	47	1·75	4·2	91·5
	Beswick	13	1·16	7·7	84·6
	Clayton	38	2·59	2·6	78·9
South Manchester	Ardwick	63	1·53	...	88·8
	Openshaw	108	3·27	1·8	87·0
	Gorton (West) ...	67	2·29	1·5	68·7
	Rusholme & Kirk	92	2·17	3·3	60·8
	Chorlton-on-Med.	120	1·98	3·3	83·3
	Hulme	229	3·51	2·6	83·0
	Moss Side	72	1·99	...	63·9
	Withington.........	218	3·48	0·9	57·8
	Gorton	118	2·71	0·8	69·5
	Levenshulme	79	3 63	1·3	50 6
City of Manchester ...		**1,814**	**2·41**	**1·8**	**73·4**

† Corrected ; the fatal cases are those actually occurring amongst the cases notified.

ABLE 3.—1924—SCARLET FEVER ATTACKS IN DISTRICTS, WITH ATTACK ATE, CASE FATALITY PER CENT., AND REMOVALS TO HOSPITAL PER CENT.

	DISTRICTS	ATTACKS	ATTACK RATE PER 1,000 LIVING	† CASE FATALITY PER CENT.	REMOVALS TO HOSPITAL PER CENT.
Manchester Township	Ancoats	63	1·56	6·3	95·2
	Central	39	2·08	...	92·3
	St. George's	109	2·32	1·8	89·9
North Manchester	Cheetham	77	1·76	1·3	79·2
	Crumpsall	30	2·31	10·0	63·3
	Blackley	55	3·94	1·8	67·3
	Harpurhey	53	2·89	1·9	75·5
	Moston	81	3·05	...	65·4
	Newton Heath	77	1·84	...	75·3
	Bradford	43	1·57	...	90·7
	Beswick	21	1·86	...	71·4
	Clayton	37	2·47	...	36·7
South Manchester	Ardwick	117	2·80	4·3	81·2
	Openshaw	99	2·94	1·0	81·9
	Gorton (West)	74	2·47	1·3	81·1
	Rusholme & Kirk	101	2·33	...	59·4
	Chorlton-on-Med.	113	1·82	4·4	80·5
	Hulme	234	3·53	5·3	84·6
	Moss Side	42	1·13	2·4	52·4
	Withington	109	1·68	0·9	59·7
	Gorton	132	2·92	0·8	65·1
	Levenshulme	78	3·50	...	59·0
ity of Manchester		**1,784**	**2·32**	**1·9**	**75·2**

† Corrected; the fatal cases are those actually occurring amongst the cases notified.

TABLE 5.—SCARLET FEVER. NUMBER OF ATTACKS AND OF DEATHS ; ALSO THE CASE FATALITY PER CENT. AT DIFFERECT AGES FOR THE THIRTY-ONE YEARS, 1891–1922, AND FOR 1923–1924.

Ages	1891–1922			1923			1924	
	Attacks	Deaths	Case Fatality per cent.	Attacks	Deaths	Case Fatality per cent.	Attacks	Deaths
Under 1 year ..	700	115	16·4	10	2	20·0	14	1
1 to 2 years ..	2,089	296	14·2	33	3	9·9	26	3
2 to 3 ,, ..	4,498	469	10·4	95	..	..	109	5
3 to 3 ,, ..	6,252	509	8·2	184	5	2·7	137	4
4 to 5 ,, ..	7,298	439	6·0	124	5	4·0	231	5
5 to 6 ,, ..	8,071	282	3·5	111	3	2·7	164	1
6 to 7 ,, ..	7,591	190	2·5	142	1	0·7	140	1
7 to 8 ,, ..	6,696	129	1·9	132	2	1·5	123	..
8 to 9 ,, ..	5,629	86	1·5	114	1	0·9	144	6
9 to 10 ,, ..	4,702	72	1·5	124	1	0·8	109	4
10 to 15 ,, ..	14,011	164	1·2	422	4	0·9	377	1
15 to 20 ,, ..	4,380	68	1·6	159	1	0·6	94	1
20 to 25 ,, ..	2,091	38	1·8	69	2	2·9	47	1
25 to 35 ,, ..	1,956	45	2·3	65	2	3·1	46	..
35 to 45 ,, ..	579	17	2·9	25	..	..	17	..
45 and over ..	153	6	3·9	5	1	20·0	6	..
All Ages	76,696	2,925	3·8	1,814	33	1·8	1,784	33

Table 6 gives a comparison of the death-rates from scarlet fever in different eas, and shows that the death-rate is slightly higher than that for the tire country.

ABLE 6.—Scarlet Fever Mortality, 1923–1924.—Rate per 1,000 living, compared with Mean of Five Years.

	1918	1919	1920	1921	1922	Mean	1923	1924
ngland and Wales	0·03	0·03	0·04	0·03	0·04	**0·03**	0·03	0·02
5 Great Towns	0·04	0·04	0·04	0·04	0·05	**0·04**	0·03	0·03
ondon	0·03	0·03	0·05	0·06	0·07	**0·05**	0·02	0·03
anchester City	0·03	0·03	0·06	0·08	0·07	**0·05**	0·04	0·04
anchester Township ...	0·05	0·07	0·07	0·05	0·05	**0·06**	0·00	0·04
orth Manchester	0·02	0·03	0·04	0·14	0·08	**0·06**	0·05	0·03
uth Manchester	0·03	0·03	0·06	0·06	0·08	**0·05**	0·05	0 05
7 Smaller Towns	0·02	0·03	0·03	0·03	0·03	**0·03**	0·02	0·02

Scarlet Fever, 1923–1924.—Attacks in Weeks, according to Date of Rash.

First Quarter			Second Quarter			Third Quarter			Fourth Quarter		
Week of Year	1923	1924	Week of Year	1923	1924	Week of Year	1923	1924	Week of Year	1923	1924
1	46	21	14	36	16	27	34	41	40	40	62
2	36	15	15	38	20	28	32	35	41	36	67
3	35	24	16	52	20	29	27	31	42	38	54
4	59	18	17	51	13	30	23	28	43	44	53
5	62	25	18	51	23	31	20	28	44	30	45
6	45	21	19	44	30	32	21	29	45	29	54
7	40	17	20	25	26	33	25	41	46	31	48
8	44	22	21	18	19	34	21	38	47	25	58
9	38	18	22	46	25	35	37	54	48	25	45
10	36	18	23	45	22	36	37	39	49	28	64
11	33	21	24	40	21	37	40	42	50	14	37
12	32	22	25	34	29	38	36	48	51	20	58
13	22	11	26	36	41	39	32	46	52	25	41
									53	..	40
otal ..	528	253	Total..	516	305	Total..	385	500	Total..	385	726

City Totals .. .. 1923—1,814. 1924—1,784.

DIPHTHERIA.

The usual tables for this disease are given below.

The following table shows the number of cases notified each year for th last ten years :—

1915	1916	1917	1918	1919	1920	1921	1922	1923	1924
548	614	581	518	471	914	1,002	806	536	570

TABLE I.

DIPHTHERIA, 1923 AND 1924.—ATTACKS IN WEEKS, ACCORDING TO DATE OF ONSET.

First Quarter			Second Quarter			Third Quarter			Fourth Quarte		
Week of Year	1923	1924	Week of Year	1923	1924	Week of Year	1923	1924	Week of Year	1923	1924
1	16	8	14	9	12	27	8	7	40	8	16
2	16	18	15	10	12	28	5	8	41	11	20
3	10	7	16	11	5	29	5	11	42	13	16
4	13	20	17	6	5	30	5	9	43	17	18
5	22	12	18	7	3	31	3	6	44	13	13
6	17	7	19	9	5	32	5	2	45	9	13
7	13	5	20	11	8	33	7	9	46	4	15
8	16	9	21	15	13	34	5	4	47	4	15
9	14	8	22	9	9	35	7	12	48	11	24
10	18	6	23	9	9	36	7	6	49	7	1
11	17	4	24	4	5	37	14	10	50	9	2
12	16	13	25	3	9	38	19	7	51	9	11
13	16	14	26	6	7	39	12	16	52	6	14
									53	..	14
Total ..	204	132	Total..	109	102	Total..	102	107	Total..	121	23

CITY TOTALS .. .. 1923—536. 1924—570.

The following table shows that the number of attacks is highest at ages to 5 :—

TABLE III.

IPHTHERIA.—NUMBER OF ATTACKS, OF DEATHS, AND CASE FATALITY AT DIFFERENT AGES FOR THE THIRTY-ONE YEARS, 1891-1922, AND FOR 1923 AND 1924.

Ages	1891-1922			1923		1924	
	Attacks	Deaths	Case Fatality*	Attacks	Deaths	Attacks	Deaths
nder one year.	392	239	61·0	13	4	8	5
1 to 2 years.	1,115	540	48·5	16	4	16	2
2 to 3 ,, .	1,430	480	33·6	44	5	40	12
3 to 4 ,, .	1,713	464	27·1	66	10	65	4
4 to 5 ,, .	1,805	414	18·6	51	4	61	7
5 to 6 ,, .	1,739	335	19·3	43	5	63	3
6 to 7 ,, .	1,362	202	14·5	52	6	49	2
7 to 8 ,, .	1,051	129	12·3	46	3	49	5
8 to 9 ,, .	880	101	11·5	33	2	30	1
9 to 10 ,, .	648	65	10·0	28	..	29	2
o to 15 ,, .	1,873	98	5·2	86	6	93	9
5 to 20 ,, .	815	35	4·3	24	1	34	1
o to 25 ,, .	580	17	2·9	10	..	11	..
5 to 35 ,, .	769	22	2·9	13	1	15	..
3 to 45 ,, .	329	6	1·8	8	..	6	..
5 and over .	149	12	8·1	3	..	1	..
ll ages	16,650	3,159	19·0	536	51	570	53

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* The percentages in this column are the actual proportions of fatal cases to the attacks at those ages.

The comparison of the case fatality of 1923 (9·5) and 9·3 in 1924 with that or the 32 previous years is matter for satisfaction.

The case fatality at all ages since 1905 has been as follows :—

1905	1906	1907	1908	1909	1910	1911	1912	1913	1914
22·4	21·1	20·4	21·8	17·9	19·9	16·5	20·0	14·9	14·3

1915	1916	1917	1918	1919	1920	1921	1922	1923	1924
18·8	11·7	10·8	10·8	9·1	7·3	8·7	9·8	9·5	9·3

From the following table we see that the apparent incidence of the disease was greatest in the districts of Blackley, Withington, Newton, Ancoats, Hulme and St. George's. The percentage of removals is 79·8. The disease is one which yields good results to iolation and care in removing infection.

TABLE IV.

DIPHTHERIA, 1923.—ATTACKS IN DISTRICTS, WITH ATTACK RATE, CASE FATALITY PER CENT., AND REMOVALS TO HOSPITAL PER CENT.

Districts		Attacks	Deaths	Attack Rate per 1000 Living	† Case Fatality per cent.	Removals to Hospital per cent.
Manchester Township	Ancoats.........	40	4	1·00	10·0	92·5
	Central	5	..	0·27	..	100·0
	St. George's	46	6	0·91	13·1	93·5
North Manchester	Cheetham	23	1	0·53	4·3	73·9
	Crumpsall	2	..	0·16	..	50·0
	Blackley	43	7	3·17	16·3	97·7
	Harpurhey	7	..	0·39	..	57·1
	Moston	19	1	0·73	5·2	52·6
	Newton Heath...	49	6	1·19	12·2	91·9
	Bradford	7	2	0·26	28·6	85·7
	Beswick	2	..	0·18	..	50·0
	Clayton	10	1	0·68	10·0	70·0
South Manchester	Ardwick	18	4	0·44	22·2	100·0
	Openshaw	13	..	0·39	..	69·2
	Gorton (West)...	20	3	0·68	15·0	85·0
	Rusholme & Kirk.	17	1	0·40	5·9	52·9
	Chorlton-on-Med.	30	3	0·50	10·0	76·6
	Hulme	63	2	0·97	3·2	82·5
	Moss Side	12	1	0·33	8·3	83·3
	Withington......	81	5	1·29	6·2	63·0
	Gorton	24	3	0·55	12·5	75·0
	Levenshulme	5	1	0·23	20·0	60·0
City of Manchester ...		536	51	0·71	9·5	79·8

† Corrected : the fatal cases are those actually occurring amongst the cases notified.

TABLE IV.

DIPHTHERIA, 1924.—ATTACKS IN DISTRICTS, WITH ATTACK RATE, CASE FATALITY PER CENT., AND REMOVALS TO HOSPITAL PER CENT.

Districts		Attacks	Deaths	Attack Rate per 1000 Living	† Case Fatality per cent.	Removals to Hospital per cent.
Manchester Township	Ancoats.........	30	..	0·74	..	93·3
	Central	16	3	0·85	18·7	100·0
	St. George's	54	1	1·06	1·9	87·0
North Manchester	Cheetham	17	..	0·39	..	76·5
	Crumpsall	2	1	0·15	50·0	50·0
	Blackley	41	3	2·94	7·3	95·1
	Harpurhey	12	..	0·66	..	75·0
	Moston	16	..	0·60	..	43·7
	Newton Heath...	50	3	1·19	6·0	94·0
	Bradford	12	3	0·44	25·0	91·7
	Beswick	9	4	0·80	44·4	88·9
	Clayton	12	..	0·80	..	75·0
South Manchester	Ardwick	25	4	0·60	16·0	92·0
	Openshaw	19	1	0·56	5·3	89·5
	Gorton (West) ...	28	5	0·94	17·9	78·5
	Rusholme & Kirk.	18	2	0·42	11·1	61·1
	Chorlton-on-Med.	39	6	0·63	15·4	79·5
	Hulme	71	5	1·07	7·0	77·5
	Moss Side	17	1	0·46	5·9	41·2
	Withington......	46	6	0·71	13·0	78·3
	Gorton	31	4	0·70	12·9	90·3
	Levenshulme	5	1	0·22	20·0	80·0
City of Manchester ...		**570**	**53**	**0·74**	**9·3**	**82·3**

† Corrected : the fatal cases are those actually occurring amongst the cases otified.

TABLE V.

DIPHTHERIA MORTALITY, 1923-1924.—RATE PER 1,000 LIVING COMPARED WITH MEAN OF FIVE YEARS.

	1918	1919	1920	1921	1922	Mean	1923	1924
England and Wales.	0·14	0·13	0·15	0·12	0·11	0·13	0·07	0·06
105 Great Towns...	0·15	0·14	0·16	0·15	0·13	0·15	0·09	0·08
London	0·17	0·18	0·22	0·25	0·25	0·21	0·13	0·12
Manchester City.	0·08	0·05	0·09	0·12	0·11	0·09	0·06	0·08
Manchester Township	0·12	0·10	0·06	0·15	0·21	0·13	0·10	0·07
North Manchester...	0·06	0·04	0·09	0·11	0·11	0·08	0·06	0·07
South Manchester ..	0·07	0·05	0·09	0·12	0·09	0·08	0·05	0·09
157 Smaller Towns .	0·14	0·12	0·14	0·11	0·09	0·12	0·06	0·06

EXAMINATION OF "CONTACTS."

So far as was practicable, swabs were taken from the throats and noses o members of each family under 14 years of age in which there had occurred a positive case of diphtheria.

In all, 961 persons were swabbed, and 27, or 2·8 per cent., were found t be harbouring the diphtheria bacillus. The figures for 1924 were 608 persons —35 positive—giving 5·8 per cent.

With a few exceptions, these were admitted to Monsall Hospital, and kept under observation until three successive swabs proved negative.

SUPPLY OF ANTITOXIN.

Diphtheria antitoxin (8,000 units concentrated) is supplied free to all medical practitioners in the City, and may be obtained by them at any time during offic hours from the Public Health Office or from the district police stations at any time during the day or night. The total quantity supplied in this manne was 3,528,000 units (or 441 phials), at a cost of £174, in 1923; and 3,920,00 units (or 490 phials), at a cost of £193, in 1924.

* ENTERIC FEVER.

The number of cases of enteric fever occurring during 1923 was 50, and uring 1924 was 103.

Table I. shows the attack and death-rates compared with those for England nd Wales.

TABLE I.

INCIDENCE OF AND DEATH-RATE FROM ENTERIC FEVER IN MANCHESTER.

Number of Notified Cases, Deaths, and Death-rates per 1,000 *living from Enteric Fever in each of Eighteen successive Years.*

YEAR	1907	1908	1909	1910	1911	1912	1913	1914	1915
o. of cases notified	265	393	369	358	256	242	292	156	174
o. of deaths.	37	75	71	62	46	43	47	34	46
eath-rate — Manchester	0·06	0·11	0·13	0·09	0·07	0·06	0·06	0·05	0·06
eath-rate — England and Wales...	0·07	0·07	0·06	0·05	0·07	0·04	0·04	0·05	0·04

YEAR	1916	1917	1918	1919	1920	1921	1922	1923	1924
o. of cases notified and accepted . .	78	86	68	90	54	74	36	50	103
o. of deaths	22	10	10	19	13	12	4	8	14
eath-rate — Manchester	0·03	0·01	0·01	0·02	0·02	0·02	0·01	0·01	0·02
eath-rate — England and Wales..	0·03	0·03	0·03	0·01	0·01	0·02	0·01	0·01	0·01

* Including typhoid and paratyphoid.

Table II. shows at what ages enteric fever appears to be most prevalen and also at what ages it is most fatal.

TABLE II.

ENTERIC FEVER.—NUMBER OF ATTACKS, OF DEATHS, AND CASE FATALIT PER CENT. AT DIFFERENT AGES FOR THE THIRTY-FOUR YEARS, 1891–1924.

Ages	1891–1924		
	Attacks	Deaths	Case Fatality Per cent.
Under one year	17	7	41·2
to 2 years	55	8	14·5
2 ,, 3 ,, ...	115	16	13·9
3 ,, 4 ,, ...	170	22	12·9
4 ,, 5 ,, ...	225	25	11·1
5 ,, 6 ,, ...	259	28	10·8
6 ,, 7 ,, ...	259	26	10·0
7 ,, 8 ,, ...	244	20	8·2
8 ,, 9 ,, ...	257	22	8·6
9 ,, 10 ,, ...	256	26	10·2
10 ,, 15 ,, ...	1,467	158	10·8
15 ,, 20 ,, ...	1,606	289	18·0
20 ,, 25 ,, ...	1,560	307	19·7
25 ,, 35 ,, ...	2,296	537	23·4
35 ,, 45 ,, ...	1,126	330	29·3
45 and over	770	260	33·7
All ages	10,682	2,081	19·5

Table III.

teric Fever.—Attack Rates in Districts, 1923 and 1924, compared with the Mean Attack Rates, 1913–1922.

Districts	Mean Attack Rate, 1913–1922	Attack Rate per 1,000 Living	
		1923	1924
coats	0·20	0·03	0·20
ntral..	0·30	..	0·16
George's..	0·22	0·08	0·29
eetham	0·14	0·29	0·09
mpsall	0·24	0·24	0·08
ckley	0·06	0·07	0·29
rpurhey	0·16	0·11	0·06
ston..	0·07	..	0·04
wton	0·17	0·07	0·12
dford	0·15	..	0·04
swick	0·25	..	..
yton	0·15	..	..
lwick	0·10	0·07	0·10
enshaw	0·24	0·02	0·15
st Gorton	0·18	..	0·10
sholme	0·21	0·07	0·05
rlton-upon-Medlock	0·17	0·05	0·21
lme	0·18	0·11	0·12
ss Side	0·06	0·03	0·08
hington	0·06	0·02	0·28
ton	0·12	0·05	..
enshulme	0·07	..	0·18
.. ..	0·15	0·07	0·13

TABLE V.

ENTERIC FEVER ATTACKS IN WEEKS REPORTED IN 1923 AND 1924, ACCORD TO DATE OF ONSET.

FIRST QUARTER			SECOND QUARTER			THIRD QUARTER			FOURTH QUART		
Week of Year	1923	1924	Week of Year	1923	1924	Week of Year	1923	1294	Week of Year	1923	19
1	1	1	14	..	1	27	..	2	40	1	
2	..	4	15	1	1	28	2	1	41	2	
3	2	7	16	1	3	29	..	..	42	1	
4	2	4	17	..	1	30	..	2	43	..	
5	..	4	18	1	1	31	1	1	44	..	
6	2	..	19	2	..	32	3	..	45	..	
7	3	..	20	..	..	33	1	..	46	1	
8	..	..	21	..	1	34	1	5	47	1	
9	2	4	22	2	1	35	1	5	48	..	
10	..	3	23	..	1	36	5	3	49	..	
11	..	2	24	..	1	37	1	5	50	3	
12	1	3	25	3	2	38	2	1	51	..	
13	1	1	26	..	5	39	..	..	52 53	.. ..	
Total	14	33	Total	10	18	Total	17	25	Total	9	

CITY TOTALS—1923, 50; 1924, 103.

TABLE VI.

ENTERIC FEVER MORTALITY, 1923 AND 1924.—RATE PER 1,000 LIVING COMPARED WITH MEAN OF FIVE YEARS.

	1918	1919	1920	1921	1922	Mean	1923	19
England and Wales.	0·03	0·01	0·01	0·02	0·01	**0·02**	0·01	0
London	0·02	0·01	0·01	0·01	0·01	**0·01**	0·01	0
CITY OF MANCHESTER	0·01	0·02	0·02	0·02	0·01	**0·02**	0·01	0
Manchester Township	0·01	0·02	0·01	0·02	0·02	**0·02**	0·00	0
North Manchester ..	0·02	0·02	0·02	0·03	0·01	**0·02**	0·00	0
South Manchester ..	0·01	0·03	0·02	0·01	0·00	**0·01**	0·02	0

Remarks.

t will be noted that in 1924 there was an increase of enteric fever in the
v. This is accounted for by the occurrence of a number of cases of para-
hoid. Actually there were 54 cases of typhoid and 49 of paratyphoid
ction. Since the beginning of the year all blood specimens sent to the
olic Health Laboratory have been examined, as a routine, for their reaction
h seven distinct organisms, including B. paratyphosus A. and B. In this
v cases of paratyphoid have been discovered which would otherwise have
n missed. But it would appear that the prevalence of this disease has
n unusual. In January, 1924, a definitely localized outbreak occurred,
olving 11 persons. The source of infection was a common one, and
estigation threw suspicion upon a firm of caterers. Blood specimens from
employees of the firm were examined, and those from two persons were
nd to agglutinate B. paratyphosus B. The two persons concerned were
arently in good health, and repeated bacteriological examinations of their
reta proved negative. A detailed report of this outbreak is filed in the
olic Health Office.

mination of Contacts.

part from special investigations, blood specimens were obtained from
household contacts, and 34 proved definitely positive. Of these 17 were
n overlooked cases of enteric fever and 15 from persons who gave no history
llness. Of the latter, two were from persons who proved to be "healthy
hoid carriers." Bacteriological examination of the excreta from the
ainder gave negative results. One of the "carriers," F46, has now
arently cleared up; the other, M50, continues to excrete typhoid bacilli.

rce of Infection.

n effort was made to trace the source of infection in all cases, and it was
nd that as regards typhoid, 17 were due to direct infection from a previous
wn case, 6 were habitual mussel eaters, 5 were infected outside the City,
in 26 no source of infection could be determined.

s regards paratyphoid 11 occurred in the local outbreak referred to,
curred in an institution, and were due to the introduction of an unrecognized
, 6 were due to direct infection, and in 14 the origin remained obscure.

BACTERIOLOGICAL EXAMINATIONS MADE FOR COUNTY BOROUGH OF MANCHESTER DURING YEAR 1923, PUBLIC HEALTH LABORATORY, UNIVE OF MANCHESTER.

Month	Diphtheria			Typhoid	Tuberculosis				
					Sputum			Milk	
	+	—	Total	Total	+	—	Total	+	—
January	52	338	390	17	44	142	186	5	37
February	54	426	480	30	49	146	195	2	29
March	71	428	499	34	53	186	239	6	35
April	46	314	360	16	46	154	200	4	37
May	30	293	323	29	53	136	189	6	35
June	42	312	354	30	47	164	211	—	39
July	28	195	223	16	41	104	145	4	32
August	30	231	261	15	39	98	137	1	13
September ..	49	308	357	35	48	115	163	1	33
October	43	344	387	32	35	134	169	3	41
November	51	291	342	22	34	133	167	3	38
December	41	228	269	23	30	166	196	3	58
Total	537	3,708	4,245	299	519	1,678	2,197	38	427

Total specimens enumerated above—7,206. Other investigations 246, which i cerebro-spinal fluid 8, milk for dirt bacteria, etc., 133, food poisoning outbreak 22, and urine for typhoid and dysentery, etc., 33, swabs, etc., 3, diphtheria virulence te Others 13.

RIOLOGICAL EXAMINATIONS MADE FOR THE NTY BOROUGH OF MANCHESTER DURING THE R 1924, PUBLIC HEALTH LABORATORY, UNIVERSITY MANCHESTER.

h	Diphtheria			Typhoid	Tuberculosis					
					Sputum			Milk		
	+	—	Total	Total	+	—	Total	+	—	Total
.. ..	44	241	285	25	38	181	219	7	49	56
.. ..	43	294	337	64	45	144	189	3	52	55
.. ..	35	205	240	20	31	126	157	2	61	63
.. ..	23	176	199	42	30	115	145	7	48	55
.. ..	25	219	244	18	43	133	176	7	65	72
.. ..	21	214	235	8	27	93	120	5	39	44
.. ..	29	264	293	43	28	90	118	3	22	25
.. ..	38	231	269	42	24	84	108	3	36	39
..	32	269	301	46	28	79	107	4	49	53
.. ..	62	488	550	30	26	81	107	5	43	48
.. ..	78	543	621	28	19	166	185	11	56	67
.. ..	67	413	480	27	29	84	113	2	35	37
.. ..	497	3,557	4,054	393	368	1,376	1,744	59	555	614

specimens enumerated above—6,805. Other investigations 242, which include pinal fluid 11, milk for dirt bacteria, etc., 38, food poisoning outbreak 31, fæces e for typhoid and dysentery, etc., 114, diphtheria virulence tests 42. Shaving for anthrax 4. Sputum, for human or bovine bacillus 1. Gland from pig 1.

CEREBRO-SPINAL FEVER.

Three cases of cerebro-spinal fever were notified in 1923, the diagnosis b confirmed in each case by the presence of the meningococcus in the cere spinal fluid. The age and sex of those affected and the dates of onset of il were as follows :—

Sex	Age	Onset
F	11	March 14th
M	$\frac{7}{12}$	March 14th
M	$\frac{7}{12}$	March 19th

Eleven cases of cerebro-spinal fever were notified in 1924, the diagnosis b confirmed in each case by the presence of the meningococcus in the cere spinal fluid. The age and sex of those affected and the dates of onset of il were as follows :—

Sex	Age	Onset	Sex	Age	Onset
F	$\frac{11}{12}$	March 17th	F	$2\frac{6}{12}$	September 15th
F	$\frac{6}{12}$	March 23rd	M	$\frac{6}{12}$	September 20th
M	7	February 24th	M	$\frac{6}{12}$	October 6th
M	10	April 3rd	F	$\frac{8}{12}$	December 1st
M	$\frac{9}{12}$	June 20th	F	$\frac{2}{12}$	December 19th
F	$\frac{5}{12}$	June 25th			

POLIOMYELITIS.

Particulars of notified cases of poliomyelitis for 1923 are given in the following t

Case	Sex	Age	District	Onsets	Notified	Paralysis	Result—J
1	M	23	Moss Side ..	Mar. 8	Mar. 14	Both legs	Died Mar
2	F	5	Rusholme ..	July 21	Aug. 2	Left leg	Permanent
3	M	7	Gorton ..	Oct. 30	Nov. 5	Both legs	Permanent
4	F	1$\frac{2}{12}$	Clayton ..	Oct. 24	Oct. 30	Right arm	Permanent

lars of notified cases of poliomyelitis for 1924 are given in the following table :—

Sex	Age	District	Onsets	Notified	Paralysis	Result—Jan. 1925
F	2	Rusholme ..	Sept. 8 1923	Jan. 7	Left leg	Permanent paralysis
M	4	Newton ..	Dec. 31 1923	Jan. 17	Both legs	Permanent paralysis
M	2	Blackley ..	Feb. 23	Feb. 28	Left arm	Permanent paralysis
M	4	Moston ..	Apl. 8	Apl. 19	Left arm	Permanent paralysis
F	3	Rusholme ..	June 26	July 1	Left leg	Permanent paralysis
F	4	Newton ..	Nov. 12	Dec. 10	Both legs	Permanent paralysis
M	1	Harpurhey ..	Nov. 22	Dec. 29	Left arm	Died Dec. 8th, 1924

ENCEPHALITIS LETHARGICA.

During 1923, 36 cases of encephalitis lethargica were notified and accepted such after investigation and observation.

The following table gives the age-groups and the sex of those attacked, and those whose illness proved fatal :—

Age Groups	Cases		Deaths		Total Cases	Total Deaths
	M	F	M	F		
der 10 years ..	3	3	1	2	6	3
to 20 ,, ..	3	4	1	—	7	1
to 30 ,, ..	—	4	—	—	4	—
to 40 ,, ..	1	2	—	2	3	2
to 50 ,, ..	4	1	3	—	5	3
to 60 ,, ..	4	5	3	3	9	6
and over	—	2	—	1	2	1
				Total ..	36	16

cal Incidence.

The cases were widely distributed over the City, and no connection between em was traced.

During 1924, 244 cases of encephalitis lethargica were notified and accepte as such after investigation and observation.

The following table gives the age-groups and the sex of those attacked, an of those whose illness proved fatal :—

Age Groups	Cases		Deaths		Total Cases	Total Deaths
	M	F	M	F		
Under 10 years ..	34	17	8	7	51	15
10 to 20 ,, ..	48	46	6	6	94	12
20 to 30 ,, ..	13	23	3	1	36	4
30 to 40 ,, ..	11	12	1	4	23	5
40 to 50 ,, ..	12	8	2	3	20	5
50 to 60 ,, and over ..	11	9	5	4	20	9
				Total ..	244	50

POLIO ENCEPHALITIS.

Two cases of polio encephalitis were reported during the year 1923. The age, sex, and onset were as follows :—M $1\frac{3}{12}$, October 11th ; M 12, December 13th.

One case of polio encephalitis was reported on March 15th, 1924, in a male, aged 7 years. The patient was removed to Monsall Hospital, where he died on March 19th, 1924.

ENCEPHALITIS LETHARGICA,

1924.

By Dr. W. St. Clair McClure.

Encephalitis lethargica especially attacks young people. The mortality is heavy, and in many of the survivors the disease is progressive and destructive. Our knowledge of its epidemiology is incomplete. It is therefore desirable to record in some detail the result of enquiries made in Manchester during the epidemic of 1924.

During the year, 282 persons were reported to be suffering from this disease. ter investigation and observation 244 were accepted as true cases.

ekly Incidence.

Four persons began to be ill in December, 1923, the period of onset of illness the remainder is shown in Table I. It will be noted that a distinct rise in number of cases occurred at the end of January, and the number continued increase each week until the end of February, after which time prevalence lined rapidly but did not entirely cease.

TABLE I.

ATTACKS IN WEEKS, ACCORDING TO THE DATE OF ONSET.

k ng	No. of Cases	Week Ending		No. of Cases	Week Ending		No. of Cases	Week Ending		No. of Cases
7	2	April	7	4	July	7	1	October	6	1
14	2	,,	14	4	,,	14	3	,,	13	1
21	4	,,	21	2	,,	21	1	,,	20	0
28	8	,,	28	8	,,	28	1	,,	27	2
4	15	May	5	4	August	4	1	November	3	0
11	24	,,	12	3	,,	11	1	,,	10	0
18	21	,,	19	4	,,	18	1	,,	17	1
25	28	,,	26	0	,,	25	1	,,	24	3
3	21	June	2	1	September	1	3	December	1	2
10	16	,,	9	1	,,	8	0	,,	8	0
17	13	,,	16	2	,,	15	1	,,	15	0
24	13	,,	23	2	,,	22	1	,,	22	0
31	11	,,	30	2	,,	29	0	,,	29	0
als ..	178			37			15			10

CITY TOTAL—240.

e and Sex.

Persons of all ages were attacked, but the incidence fell most heavily upon ose under the age of 20 years. Of the total number, 129 were males, and 5 were females, so that the attack rate was much the same for either sex.

TABLE II.

ATTACKS IN AGE-GROUPS.

Years ..	0–5	5–10	10–20	20–30	30–40	40–50	50–60	60 o
Males	8	26	48	13	11	12	8	
Females	4	13	46	23	12	8	4	
Total	12	39	94	36	23	20	12	

Mortality.

At the date of this report, 25 males and 25 females had died; a total of 50 deaths, giving a mortality case rate of 20·5 per cent. It is likely that this rate may be increased by the occurrence of more deaths; on the other hand, it is certain that all cases were not reported. It is probable that 20 per cent. represents approximately the mortality rate for this epidemic.

TABLE III.

MORTALITY IN AGE-GROUPS.

Age in Years ..	0–10	10–20	20–30	30–40	40–50	50–60	60 o
No. of cases	51	94	36	23	20	12	
No. of deaths	15	12	4	5	5	6	
Mortality rate	29·4	12·8	11·1	21·7	25·0	50·0	3

TABLE IV.

DURATION OF ILLNESS IN 44 FATAL CASES.

Days ..	0–7	7–14	14–21	21–28	28–60	60–90	90–100	100 o
No. of cases ..	7	16	5	4	6	3	0	

ocal Incidence.

In December, 1923, four cases occurred in four districts. In January, 1924, iere were 21 cases in 15 districts, and thereafter the whole City was involved, ie districts of Blackley and Clayton alone remaining comparatively free. 4 cases occurred amongst people living in 240 different streets. Here and iere cases appeared to group themselves, but no actual connection between ie cases could be determined.

TABLE V.

INCIDENCE ON DISTRICTS.

District	No. of Cases	Rate per 1,000
ncoats	22	0·55
entral	5	0·27
t. George's	21	0·42
heetham	21	0·49
rumpsall	3	0·23
lackley	2	0·14
arpurhey	3	0·16
oston	6	0·23
ewton	14	0·34
radford	11	0·41
eswick	2	0·18
layton	1	0·06
rdwick	13	0·31
penshaw	19	0·57
Vest Gorton	9	0·30
usholme	13	0·30
horlton-upon-Medlock	8	0·13
ulme	22	0·34
oss Side	7	0·19
Vithington	10	0·16
orton	24	0·55
evenshulme	8	0·36
ll Districts	244	0·32

ccupational Influence.

Cases occurred amongst workers, housewives, scholars, and infants, and nvestigation showed that no particular occupation influenced the spread. 8 cases occurred amongst scholars attending 56 schools. In five schools here were three cases and in ten schools there were two. In only a single nstance were two children in the same class affected. Special observation f school contacts were made, and it did not appear that school attendance ad any noticeable effect upon the incidence.

Children from infected houses were kept from school for a period of three veeks after isolation of the case.

Social Status.

The social status of persons attacked can best be indicated by classification of the cases according to the size of house occupied, and to the amount of house room per person in affected households. This is done in Table VI., and the results show the effect of unfavourable environment upon the incidence of the disease.

TABLE VI.

ACCOMMODATION PER PERSON OF PERSONS LIVING IN INFECTED HOUSES.

Accommodation per person	No. of persons living in infected dwellings	Per cent. of total number of persons living in infected dwellings	Percentage distribution of population. Census 1921
Under 0·3 rooms	18	1·2	0·5
0·3 and under 0·5 rooms ..	300	20·7	7·4
0·5 and under 0·7 rooms ..	546	37·6	24·2
0·7 and under 1·0 rooms ..	272	18·7	19·0
1·0 rooms and over	316	21·8	49·0

Total, 1,452

Health of Contacts.

1,207 family contacts were exposed to infection in 1924, and repeated enquiries were made as to the existence among them of any indisposition. Apart from a few cases of chronic invalidism of many years standing, 32 showed some signs of illness over the period covered by the enquiry. Nasal or bronchial catarrh accounted for 11, influenzal cold for 9, tonsillitis for 4, and hiccup for 2. There is no means of knowing at present whether any of these complaints were, in reality, abortive forms of encephalitis lethargica.

Association with Influenza.

During the first three months of the year, influenza of a mild type was stated by medical practitioners to be prevalent. It was not however until the middle of March, when the epidemic of encephalitis had subsided, that influenza of a severe type became evident. Special enquiry showed that it was the exception for a case of influenza to have occurred amongst the contacts (10 out of 1207), nor did the patients themselves suffer from true influenzal symptoms. Influenza, although said to be prevalent, did not, to any extent, invade households attacked by encephalitis. Influenzal cases have not given rise to encephalitis lethargica nor have cases of the latter disease given rise to influenza. During the past five years there has been no correlation in point of time in the incidence of the two diseases in the City, and study of the epidemic waves has produced no evidence in support of the contention that they are associated one with the other.

pidemic Hiccup.

The relationship of epidemic hiccup to encephalitis lethargica has not been efinitely determined. Hiccup may occur as one of the symptoms of ncephalitis, and one must suppose that it may be the one and only sign of hat disease. Epidemics of hiccup and encephalitis however, do not seem o occur simultaneously. In Manchester, an epidemic of hiccup preceded the ncephalitis epidemic of 1924. The attacks consisted of persistent hiccup asting three to ten days, unaccompanied, in the majority of cases, by other ymptoms. Some few exhibited drowsiness. The sufferers invariably ecovered without sequelæ. Enquiry of doctors, twelve months later, whether ny of these patients have since sought advice for post-encephalitic symptoms as, so far, elicited negative replies. In the investigation of cases of encephalitis ethargica, special enquiry was made amongst family contacts for a history f hiccup. Two out of 1,200 were discovered with such a history. M 39, ontact with case 92, suffered from hiccup from February 4th to 7th, ccompanied by an influenzal cold; the date of onset of illness in the ncephalitis patient was January 28th. M 19, contact with case 161, suffered rom hiccup in February, with no other symptoms; the onset of the encephalitis ase was on March 28th.

The households affected with hiccup were not, with these two exceptions, hose attacked by encephalitis.

Enquiry was also made as to the occurrence of hiccup in encephalitis patients. t was not a common symptom. It was noted in 8 cases out of 282.

There is here no definite evidence that the two affections are associated, hough such a possibility is not excluded.

ultiple cases in a Household.

On one occasion three persons were notified from a single house. These atients, however, showed no signs of encephalitis lethargica, and there is no oubt that each of them had a straightforward attack of influenza.

In certain other instances cited here suspicion fell upon one of the family ontacts.

ase 21.

F 17, onset January 30th, 1924. Her sister suffered from encephalitis ethargica in February, 1923, and completely recovered. She showed no igns of recrudescence at the time of the second attack.

ase 155.

M 4, onset March 21st, 1924. His father visited a case of encephalitis ethargica in another house daily from February 21st to March 2nd. He imself showed no signs of illness.

Case 178.

F 38, onset April 8th, 1924. Her brother, aged 34 years, gave a history of an illness which was probably encephalitis lethargica. He began to be ill on March 3rd, 1924, and suffered from diplopia, hiccup, drowsiness, and "jerkings of his muscles." He had not consulted a doctor, and he had apparently quite recovered at the time of his sister's illness.

Case 181.

M 3, onset April 18th, 1924. His brother, M 9, began to be ill on March 9th, and was admitted to an Institution on March 22nd. The diagnosis in the Institution was pneumonia. The history of illness obtained from the parents was that the boy began with fever, vomiting, drowsiness, double vision, and twitching of the limbs. Both children had completely recovered six months later.

Case 226.

F 16, onset June 18th, 1924. Her sister, F 17, began to be ill on June 26th, 1924, with symptoms not incompatible with encephalitis lethargica. She was admitted to hospital, and was there thought not to be a true case. Her symptoms before admission to hospital included dizziness, vomiting, fever, restlessness, and insomnia, mild delirium at night, and drowsiness during the day. She was in hospital for 56 days, and was discharged apparently quite recovered.

Case 236.

F 12, onset July 7th, 1924. Her sister had encephalitis lethargica in June, 1923. There is doubt as to the correctness of the diagnosis in case 236.

Case 21/25.

M 15, onset, 1925. His father suffered from this disease in February, 1923.

Type of Disease.

It is not intended here to describe in detail the clinical aspects of the disease as it occurred in Manchester, but some indication is given of the frequency of certain symptoms.

Vomiting occurred at the beginning of the illness in about 10 per cent. of the cases and headache in 36 per cent.

Pronounced lethargy, with or without nocturnal insomnia, was present in 70 per cent.

Insomnia and delirium, without lethargy, were a marked feature in some 30 per cent. In many of these there was hebetude of body of lesser degree than that to which the term lethargy has been applied.

Paralysis of one or more cranial nerves occurred in 40 per cent.

Double vision was complained of by 107 persons or about 44 per cent. of the total, and in addition, 20 persons complained of hazy vision. Nystagmus was noted in 10 per cent.

Spasms or twitchings, or movements simulating chorea, occurred at the eginning of the illness in 31 per cent.

Hiccup was recorded in 8 cases.

The fundus oculi was examined in 58 patients. In one there was engorgement f the papillary veins; in the remainder there was no pathological change t the date of examination.

Although cases of the positive type were frequently seen, yet, the outstanding eature of the epidemic was the frequency of diplopia as a symptom of onset. ndeed, in a considerable number, diplopia and some drowsiness were the nly symptoms displayed.

solation and Disinfection.

In view of the potential infectivity of the disease, isolation of the infected person was insisted upon, and disinfection of the rooms occupied by the patient was carried out.

Of the 244 cases, 110 were removed to Monsall Hospital, 60 were treated in other institutions, and 70 were nursed at home. The duration of stay in Monsall Hospital of non-fatal cases varied from 14 to 104 days, the average being 38 days.

Diagnosis.

In the majority of cases the diagnosis is unmistakeable. In an infant it is not easy, and in old people symptoms due to senility or to cerebro softening have caused some difficulty. Meningitis can, as a rule, be excluded by examination of the cerebro-spinal fluid, and such examination has proved of the greatest value in doubtful cases. Influenza only occasionally, if ever, simulates this disease, though it is probable that some mild cases of encephalitis lethargica have been so labelled. Certain other conditions, such as cerebral abscess and chorea, have caused difficulty.

The diagnosis in 38 cases reported as encephalitis lethargica was amended as follows:—

> Influenza, 5; typhoid, 1; tubercular meningitis, 5; cerebral abscess, 2; cerebro-spinal fever, 1; chorea, 2; tonsillitis, 2; broncho-pneumonia, 4; muscular rheumatism, 2; gastritis, 3; anæmia, 2; senility, 2; others 7.

Incidence on the Nursing Staff.

No member of the staff at Monsall Hospital was affected. Two nurses in two other institutions were attacked, but they had not been in contact with any known case.

Sequelæ.

It is too soon to determine the end results of the illness upon those attacked during the present year. As already stated, the case mortality rate was 20·0 per cent. Dr. McClure has examined 55 survivors whose illness began at least six months ago, and a record of their condition is filed in the Public Health Office.

Of the 55, 10 were apparently completely recovered. The remainder w incapacitated in greater or less degree. One of the most frequent complai met with was intractable insomnia at night with unusual sleepiness during day; this occurred in 26 persons. Commencing Parkinsonism was noted times. Defective vision, due to paresis of accommodation was present in Other pareses were infrequent. In 23 cases a mental or moral change noted, in one of these the symptoms pointed to dementia, necessitating admiss to an asylum. In 6 cases the flow of saliva was noted as being excessive

It is difficult to summarize the conditions met with, but of the 55, 19 h been recorded as totally incapacitated, 26 as partially incapacitated, and as recovered.

Cases occurring in 1920 *and* 1921.

50 cases of encephalitis lethargica occurred in the two years 1920 and 19 Of these, 28, or 56 per cent., died. Examination has recently been made the 22 survivors, and it has been recorded that 5 were totally incapacitat the disease rapidly progressing towards complete helplessness; 4 were able do housework only, and 13 were able to follow their employment or atte school, though not all of them had completely recovered. Complete recove was noted in 7 cases.

W. St. C. McClure.

MEASLES AND GERMAN MEASLES.

(Notifiable in January, 1916.)

The numbers notified were in the respective quarters of—

Diseases Notified	1923					1924			
	1st quar.	2nd quar.	3rd quar.	4th quar.	Total	1st quar.	2nd quar.	3rd quar.	4th quar.
Measles—									
By Doctors	729	1,118	498	133	2,478	2,072	9,181	1,191	651
,, Others	295	347	282	79	1,003	486	3,391	1,174	203
Total	1,024	1,465	780	212	3,481	2,558	12,572	2,365	854
German Measles—									
By Doctors	29	19	14	18	80	52	74	28	55
,, Others	4	6	3	1	14	4	4	5	2
Total	33	25	17	19	94	56	78	33	57

aths from measles in successive years are shown in the following table :—

TABLE 1.

DEATHS FROM MEASLES IN THE CITY OF MANCHESTER DURING THE TEN YEARS 1915–1924.

Under One Year			Years of Age				Total 5 Years and upwards	Total deaths at all ages
Under 3 Months	3-5 Months	6-11 Months	1-	2-	3-	4-		
1	5	98	215	64	29	20	15	447
3	2	37	80	28	12	8	9	179
0	5	62	98	55	24	17	16	277
0	2	38	55	26	21	13	11	166
0	2	24	37	18	11	3	9	104
0	8	45	67	39	17	15	19	210
2	0	0	1	1	0	0	1	5
1	6	83	159	65	13	10	17	354
0	2	12	46	15	3	2	3	83
2	5	63	168	62	25	28	17	370

he deaths in quarters are given in Table 2 below.

will be seen that the heaviest mortalities generally occur in the first and nd quarters of the year, though one year differs greatly from another in respect. In 1923 and 1924 the greatest mortality occurred in the second ters.

TABLE 2.—MEASLES, DEATHS IN QUARTERS.

YEAR	1st Quarter	2nd	3rd	4th	Whole Year
–1910 (mean)..	80	122	68	59	329
–1920 (mean)..	87	125	33	32	277
....	1	2	0	2	5
....	1	162	161	30	354
....	13	42	21	7	83
....	39	295	34	2	370

In Table 3 is given a comparison of Manchester mortality with that occurri in other districts.

TABLE 3.—MEASLES MORTALITY RATES.—RATE PER 1,000 LIVING, COMPARED WITH MEAN OF FIVE YEARS.

	1919	1920	1921	1922	1923	Mean 1919-23	192
England and Wales	0·07	0·19	0·06	0·15	0·14	**0·12**	0·1
105 Great Towns	0·07	0·22	0·08	0·22	0·15	**0·15**	0·1
London	0·05	0·22	0·05	0·35	0·08	**0·15**	0·2
CITY OF MANCHESTER ...	0·05	0·27	0·01	0·47	0·11	**0·18**	0·4
Manchester Township ...	0·06	0·39	0·01	1·14	0·14	**0·35**	1·1
North Manchester	0·05	0·21	0·00	0·33	0·05	**0·13**	0·4
South Manchester	0·05	0·27	0·01	0·37	0·13	**0·17**	0·3
157 Smaller Towns......	0·08	0·19	0·05	0·10	0·19	**0·12**	0·0

The distribution of the deaths in districts shows that the death-rate w highest in Hulme, 1923 (0·34), followed by Central (0·27), Chorlton-upo Medlock (0·20), Beswick (0·18), and Ardwick (0·15), and in 1924, Anco (1·17), St. George's (1·13), Central (0·91), and Bradford (0·80).

(Table omitted.)

The above table shows that in 1923 the death-rate from measles was Manchester lower, and in 1924 considerably higher, than that for the count generally.

WHOOPING COUGH.

The cases of this disease notified are obtained entirely through the scho and the same disabilities attach to this mode of notification as were experienc in measles. Notwithstanding, these notifications are useful. The cases visited and dealt with by the Health Visitors in the same manner as ca of measles.

The highest death-rates in 1923 are, in St. George's (0·85), Newton (0·6 Ancoats (0·60), Beswick (0·53), and Bradford (0·45); and in 1924, Hul (0·47), Harpurhey (0·33), Central (0·26), and Bradford (0·26).

Whooping cough notifications during 1923 and 1924 :—

	First quarter	Second quarter	Third quarter	Fourth quarter	Total
23	1,092	1,632	739	341	3,804
24	399	546	304	457	1,706

TABLE 1.

WHOOPING COUGH MORTALITY.—RATE PER 1,000 LIVING, COMPARED WITH MEAN OF FIVE YEARS.

	1918	1919	1920	1921	1922	Mean	1923	1924
ngland and Wales.	0·29	0·07	0·11	0·12	0·16	**0·15**	0·10	0·10
5 Great Towns ...	0·34	0·07	0·14	0·13	0·19	**0·17**	0·12	0·12
ondon	0·43	0·05	0·17	0·12	0·25	**0·20**	0·09	0·11
TY OF MANCHESTER	0·43	0·05	0·11	0·23	0·13	**0·19**	0·24	0·15
nchester Township	0·90	0·06	0·04	0·40	0·11	**0·30**	0·65	0·17
orth Manchester...	0·34	0·05	0·09	0·21	0·07	**0.15**	0·28	0·13
uth Manchester ..	0·36	0·05	0·13	0·10	0·17	**0·16**	0·12	0·15
7 Smaller Towns..	0·25	0·08	0·10	0·11	0·15	**0·14**	0·10	0·09

TABLE 2.—WHOOPING COUGH, DEATHS IN QUARTERS.

Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Whole Year
11-1920 (Mean)..	59	73	24	17	173
21	40	78	31	20	169
22	24	37	25	13	99
23	48	113	12	11	184
24	26	53	10	27	116

Public Health Office,
Manchester,
5th February, 1924.

WHOOPING COUGH.

This disease has, in Manchester, during the last 10 years, caused mo deaths than scarlet fever and diphtheria together. The number of deatl certified as being due to whooping cough during this period was 1,60 compared with 531 deaths from scarlet fever and 728 deaths from diphtheri (See table below.)

YEAR	WHOOPING COUGH		MEASLES		SCARLET FEVER		DIPHTHERIA	
	Known Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Death
1914	1,866	283	4,354	293	4,712	160	746	111
1915	797	70	3,520	447	2,922	83	548	105
1916	†6,000	300	9,230	179	1,185	35	614	67
1917	†980	49	10,613	277	829	15	581	63
1918	5,738	330	8,448	166	779	21	518	58
1919	1,000	40	8,420	104	1,758	26	471	41
1920	2,290	84	10,635	210	3,829	46	914	67
1921	4,415	169	1,135	5	5,400	59	1,002	90
1922	2,160	99	19,659	354	3,618	55	806	79
1923	3,804	184	3,482	84	1,920	31	564	47
	29,050	1,608	79,496	2,119	26,752	531	6,764	728
Manchester—Case fatality rate per cent.	5·5		2·7		2·0		10·8	

† Estimate only, as figures not available for these years.

It should be pointed out that the estimated number of cases (29,050 occurring during the 10 years does not represent all the actual cases. Sinc this disease is not notifiable by medical practitioners, many cases escap our notice.

Again, the stated number of deaths (1,608) occurring in the 10 years cannot e regarded as the whole of the actual deaths due to this disease, as many eaths associated with whooping cough are ascribed to bronchitis and broncho- neumonia—two of the most fatal complications of the disease. In many ases the medical practitioners are not called in to see the patient until severe ronchitis and broncho-pneumonia has developed, when the primary condition, hooping cough, is less in evidence.

From the consideration of the above, two facts are clear:—The total number f cases is under-estimated—likewise the number of deaths. If, however, we ccept these figures as approaching the truth, the case fatality rate works out at ·5 per cent., compared with a case fatality rate of just under 5 per cent.— e rate quoted by the most eminent authorities.

Age is, of course, an important factor when considering the case fatality rate, e disease being most fatal during the first year of life, diminishing gradually s age advances, claiming, however, a heavy toll on life up to the age of 5 years. part from the facts which a study of the mortality statistics reveal, whooping ugh, like measles, is recognised as a frequent precurser of ill-health and sablement in after years.

In dealing with this disease, the aims of public health administration are s follows:—

(1) To prevent the disease reaching the infants and young children, where this is possible.

(2) To prevent the onset of serious complications of those already infected by placing them in the best surroundings, and ensuring adequate nursing and medical attention.

Administrative Measures at present in use.

1. At present cases of whooping cough are notified to this Department by e School Attendance Officers, but the great majority of the cases are scovered and brought to our notice by the Health Visitors during their utine visits.

2. It is the practice now to encourage the parents of children suffering from hooping cough to seek medical advice, and if the home conditions do not rmit of reasonable isolation or the patient cannot receive proper attention, moval to hospital is urged, providing the doctor attending the case considers ch action advisable. In addition to this, the usual procedure of cleansing e house and the washing of the bedding after recovery of patient is carried t, also the requirements of the Board of Education with reference to excluding ntacts from school is enforced.

3. Accommodation was provided in Monsall Fever Hospital in July, 1923, for cases in which the medical practitioner attending considered removal advisable.

4. A circular letter was sent to medical practitioners in Manchester, acquainting them of the facilities provided in Monsall Hospital for cases of whooping cough.

5. Handbills to parents were distributed at the schools pointing out the serious nature of the disease, and giving general advice to parents.

The foregoing administrative measures have failed to get a reasonable number of children into hospital for the following reasons :—

(1) In a large number of instances we hear of the cases long after they have completely recovered.

(2) We hear of them when still suffering from the disease, but not sufficiently ill to warrant removal to hospital, and too late to prevent the infection of other children in the house, where this might have been possible.

Further Action suggested for the Medical Officer of Health's Consideration.

1. The compulsory notification of whooping cough by medical practitioners—

(*a*) Notification of the first case of whooping cough occurring in each family, by medical practitioners, as in the case of measles under th Measles and German Measles Regulations, 1916, issued by the Ministr of Health, under Section 130 of the Public Health Act, 1875. *Thi would mean an additional cost of approximately* £300 *per annum* ; or

(*b*) The inclusion of whooping cough in the list of compulsory notifiabl diseases under the Infectious Diseases (Notification) Act, when ever case would be notified. *This would cost approximately* £400 *pe annum.*

2. The practicability of providing for the open-air treatment of whoopin cough cases in Monsall Hospital, realising that Monsall is an undesirable plac for the open-air treatment of any pulmonary condition.

3. The provision of nursing assistance for cases treated at home.

Note.—Treatment and prophyllaxis by vaccine, which has recently bee tried by the Department of Health of the City of New York, has not been i use long enough to warrant the expression of opinion as to its usefulness o otherwise.

DIARRHŒA.

BLE 1.—1923 AND 1924.—DIARRHŒA AND SIMPLE CHOLERA MORTALITY: DEATHS UNDER TWO YEARS OF AGE PER 1,000 BIRTHS, COMPARED WITH THE MEAN OF FIVE YEARS.

	1918	1919	1920	1921	1922	Mean	1923	1924
gland and Wales..	10·99	9·59	8·3	15·5	6·2	**10·1**	7·7	7·3
Great Towns ..	14·46	12·24	10·4	19·3	7·6	**12·7**	9·9	9·2
ıdon	15·67	16·22	9·5	21·3	7·1	**14·0**	10·2	8·4
Y OF MANCHESTER	9·29	11·05	12·4	20·9	11·3	**13·0**	12·2	11·10
nchester Township	18·20	13·14	18·6	33·8	17·1	**20·1**	24·2	16·58
rth Manchester ..	6·87	9·43	9·4	17·1	8·8	**10·3**	7·8	11·04
ıth Manchester...	7·78	11·16	11·7	18·4	10·5	**11·9**	10·1	9·25
Smaller Towns..	9·73	8·67	7·8	15·6	5·6	**9·5**	6·4	6·2

he number of deaths in successive years, and their distribution in quarters the year, are exhibited in the following figures :—

TABLE 2.—DIARRHŒA AND SIMPLE CHOLERA DEATHS IN QUARTERS, 1915–1924.

	1915	1916	1917	1918	1919	1920	1921	1922	1923	1924
st Quarter	49	55	48	30	28	45	59	38	53	51
ond Quarter ..	57	48	30	31	27	54	59	59	45	51
ırd Quarter ...	255	135	140	54	59	63	139	44	40	46
ırth Quarter ..	127	75	61	32	56	88	130	50	64	63
	488	313	279	147	170	250	387	191	202	211

his table shows that the mortality was fairly equally distributed throughout year.

The meteorological data given in the following table show that in the thir quarter of 1923 the temperature was only slightly above the average. Thei was an excess in the rainfall, but the death-rate was the lowest yet recorded

In 1924 the temperature was below the average, whilst the rainfall was abov the average, but lower than in 1923.

Table 3.

Third Quarter of the years	Mean Temperature	Rainfall, Inches	Humidity, per cent.	Diarrhœa and Simple Cholera Mortality. Annual Rate (third quarter) per 1,000 living
1891-1900 Mean	59°·2	9·9	76 %	4·04
1901-1910 Mean	59°·1	8·5	77 %	2·81
1911-1920 Mean	59°·4	9·6	78 %	1·32
1921	61°·4	6·8	75 %	0·75
1922	56°·1	13·1	80 %	0·24
1923	59°·6	12·0	83 %	0·21
1924	58°·4	10·9	79 %	0 24

DYSENTERY.

By Dr. W. A. Young.

1923.

Two cases of dysentery were notified during the year. One case, an ex service man, was notified by a medical practitioner, and was treated at hom The other, a child, aged 5 years, died in hospital, and the nature of the illnes was only discovered as the result of a post-mortem examination of the intestine In this latter case no source of infection could be traced.

In addition to the death of this child, another death occurred in 1923, i which death was ascribed to streptococcal peritonitis secondary to old dysenter infection. During the year the 18 cases of dysentery and the 21 carriers whic have become known to the department during the last 5 years have bee visited every 6 months, and the health of the other members of their familie has been investigated. The investigation has not, so far, revealed any suspiciou symptoms among the members of the patients' or carriers' families or amon their workmates. Three of the 18 cases of dysentery and 6 of the 21 carrier have removed out of Manchester. In each case where the address has bee obtained the Medical Officer of Health for the district has been informed.

1924.

Two cases of dysentery were notified during the year. Both cases were ex-service men, and were notified by medical practitioners. One case was treated in the Ministry of Pensions Hospital, and the other case was treated at home.

In addition to the above two cases notified, one death from dysentery occurred in an ex-service man, in which death was ascribed to (1) dysentery, 2) exhaustion and heart failure.

During the year the 20 cases of dysentery and the 21 carriers which have become known to the department during the last 6 years have been visited every 6 months, and the health of the other members of their families has been nvestigated. The investigation has not, so far, revealed any suspicious symptoms among the members of the patients' families or among their workmates. Six of the 20 cases of dysentery and 7 of the 21 carriers have emoved out of Manchester. In each case where the address has been obtained the Medical Officer of Health has been informed.

MALARIA.

By Dr. W. A. Young.

1923.

The number of new cases of malaria notified during 1923 was 16.

The notifications came from the following sources :—

Medical Practitioners	The Ministry of Pensions through the Ministry of Health
16	Nil
16	

None of the above-mentioned cases had been previously notified. One case was a male who had contracted the disease when living abroad, whilst 15 were ex-service men who had served overseas and had received treatment for this complaint when in the Army.

The ex-servicemen were stated to have become infected whilst serving in the following countries :—

India	6
Salonika..	4
East Africa	2
Nigeria	1
Mesopotamia..	2
	15

One of the above cases was notified as suffering from acute lobar pneumonia, complicated by malaria, and was found to be an ex-service man who had received treatment for malaria whilst in the Army.

The cases remained at home under the care of the family doctor, or attended the Ministry of Pensions Hospital as out-patients.

The Ministry of Pensions continue to examine and treat at their Tropical Diseases Clinic all ex-service men known to be suffering from malaria.

No case of malaria was notified in which there was any suspicion that the disease had been contracted in this country.

During the year one death occurred which was ascribed to malaria. This was an ex-service man who was notified as suffering from malaria in 1919, but who also suffered from pulmonary tuberculosis.

1924.

The number of new cases of malaria notified during 1924 was three.

The notifications came from the following sources :—

Medical Practitioners	The Ministry of Pensions through the Ministry of Health
3	Nil
3	

None of the above-mentioned cases had been previously notified, and all were ex-service men who had served overseas and had received treatment for the complaint whilst in the Army.

The ex-service men were stated to have become infected whilst serving in he following countries :—

Mesopotamia	1
India	2
	3

In addition to the above, one death occurred in an ex-serviceman who had ontracted malaria whilst in Egypt.

The cases remained at home under the care of the family doctor, or attended he Ministry of Pensions Hospital.

The Ministry of Pensions continue to examine and treat at their Tropical iseases Clinic all ex-servicemen known to be suffering from malaria.

No case of malaria was notified in which there was any suspicion that the isease had been contracted in this country.

TRENCH FEVER.

REPORTS—1923 and 1924.

No cases of trench fever were notified during this period.

VENEREAL DISEASES SECTION.

By Dr. W. A. Young.

REPORTS—1923 and 1924.

Clinics for Treatment of Venereal Diseases.

1) *Manchester Royal Infirmary.*

The general waiting room of the out-patient department is available for he venereal disease patients. Rooms off the main hall are allocated for venereal isease treatment at stated hours. These consist of a small waiting room off he main hall, two rooms for consultation and treatment, one room for rrigation, a small laboratory, and the use of the general dispensary of the ospital. There is no provision for intermediate treatment.

Hours of clinics :—

Females and children—Wednesday and Thursday at 11 a.m.

Males—Monday, Wednesday, and Thursday, 6 p.m.

(2) *Ancoats Hospital.*

There are two consulting and treatment rooms, one for syphilis and o for gonorrhœa, in which arrangements are provided for irrigation, a dispensar and a waiting hall.

There is no intermediate treatment room. A laboratory is attached, whe all examinations are made.

Hours of clinics :—

Females—Wednesday, 11-30 a.m.

Males—Wednesday and Saturday, 5-30 p.m.

(3) *Manchester and Salford Hospital for Skin Diseases.*

The patients use the general waiting hall, and are not separated off fro the general body of patients. They also go to the same consulting room There is a special treatment room. Attached is the laboratory where a examinations are carried out. The hospital dispensary is available. I addition to the ordinary skin diseases, syphilis only is treated at this clinic.

Hours of clinic :—

Males and females—Daily (except Sunday), 9 to 11 a.m.

(4) *St. Luke's Hospital.*

One waiting room in the basement and a douche room on the ground floo are open to all members of the clinic for intermediate treatment from 10 a.m to 5 p.m. On the ground floor there are a consulting room, a dispensary, an a treatment room, and accommodation is provided for 17 male and 22 femal in-patients.

Hours of clinics :—

Males and females—Monday, Tuesday, Thursday, and Friday, 5 p.m.

Females only—Wednesday, 5 p.m.

(5) *St. Mary's Hospital.*

The venereal disease patients are not separated from the general body o women patients. The same waiting room is used, but not the same consultin rooms. These consist, for venereal diseases, of a suite of three—undressin room, consulting room, and treatment room. The general dispensary is used Smears are examined by the hospital pathologist ; Wassermann tests ar carried out by Professor W. W. C. Topley at the Public Health Laboratory Intermediate treatment is provided by the nurse in charge on Tuesday a 7 p.m.

Hours of clinics :—

Women and children only—Monday, Wednesday, Thursday, an
Friday, 9 a.m.
—Thursday, 5 p.m.

STATISTICS FOR 1923.

A summary showing the work done during 1923 at—

(1) The Manchester Royal Infirmary ;
(2) Ancoats Hospital ;
(3) The Manchester and Salford Hospital for Skin Diseases ;
(4) St. Luke's Hospital ;
(5) St. Mary's Hospital ;
(6) Higher Ardwick Child Welfare Centre.
(7) Lower Moss Lane Child Welfare Centre ; and
(8) The Auxiliary Centre for Females at Monsall Hospital (attendances only) ;

is given in the following Table :—

TABLE I.

	Syphilis		Soft Chancre		Gonorrhœa		Conditions other than Venereal		Total	
	Males	Females	Males	Females	Males	Females	Males	Females	Males	Females
Number of persons who, on the 1st January, 1923, were under treatment or observation for	1,311	924	31	1	1,261	175	36	47	2,639	1,147
Number dealt with during the year *for the first time* and found to be suffering from :—										
Syphilis only	946	612	—	—	—	—	—	—	946	612
Soft Chancre only	—	—	85	—	—	—	—	—	85	—
Gonorrhœa only	—	—	—	—	1,357	184	—	—	1,357	184
§Syphilis and Soft Chancre	—	—	—	—	—	—	—	—	—	—
§Syphilis and Gonorrhœa	—	—	—	—	—	—	—	—	—	—
§Gonorrhœa and Soft Chancre	—	—	—	—	—	—	—	—	—	—
§Syphilis, Soft Chancre, and Gonorrhœa..	—	—	—	—	—	—	—	—	—	—
Conditions other than Venereal	—	—	—	—	—	—	680	442	680	442
Total—Item 2	946	612	85	—	1,357	184	680	442	3,068	1,238
Total—Items 1 and 2	2,257	1,536	116	1	2,618	359	716	489	5,707	2,385
Number of persons who ceased to attend—										
(*a*) Before completing the first course of treatment for	243	180	15	1	488	81	7	41	753	303
(*b*) After one or more courses, but before completion of treatment for	136	136	—	—	—	3	—	—	136	139
(*c*) After completion of treatment, but before final tests as to cure of ..	202	125	—	—	175	12	—	—	377	137
Wassermann test only	28	10	—	—	—	—	—	—	28	10
Number of persons transferred to other Treatment Centres after treatment for..	120	44	—	—	116	15	—	4	236	63
Number of persons discharged after completion of treatment and observation for	394	166	76	—	438	60	682	344	1,590	570
Number of persons who, on the 1st January, 1924, were under treatment or observation for	1,134	875	25	—	1,401	188	27	100	2,587	1,163
Total—Items 3, 4, 5, and 6	2,257	1,536	116	1	2,618	359	716	489	5,707	2,385
Out-patient attendances—										
(*a*) For individual attention by the Medical Officer	16,181	13,181	280	—	13,879	3,162	1,331	1,375	31,671	17,718
(*b*) For intermediate treatment — *e.g.*, irrigation, dressings, etc.	729	—	2,598	—	13,062	4,330	—	129	16,389	4,459
Total attendances	16,910	13,181	2,878	—	26,941	7,492	1,331	1,504	48,060	22,177
Aggregate number of "In-patient days" of treatment given to persons who were suffering from	486	554	95	—	605	1,949	165	827	1,351	3,330

	For detection of			For Wassermann Reaction
	Spirochetes	Gonococci	Other Organisms	
9. Examinations of Pathological material :—				
(*a*) Specimens which were examined at, and by the Medical Officer of, the Treatment Centre	197	3,492	2	2,000
(*b*) Specimens from persons attending at the Treatment Centre which were sent for examination to an approved laboratory..	—	28	3	2,325

Table III.

Venereal Diseases—Pathological Work done during 1923.

	Wassermann Reaction					Gonococci					Spirochaetes				
	Positive	Negative	Doubtful	Unsatis-factory Specimens	Total Examined	Positive	Negative	Doubtful	Unsatis-factory Specimens	Total Examined	Positive	Negative	Doubtful	Unsatis-factory Specimens	Total Examined
A. Work done at the Public Health Laboratory (University Bacteriological Department) :—															
Medical Practitioners..	218	431	148	*7*	797	36	104	12	—	152	3	6	—	—	9
Institutions other than Approved Centres	109	390	2	*14*	501	17	163	28	—	208	—	—	—	—	—
St. Luke's Hospital	191	549	120	*5*	860	—	4	—	—	4	—	—	—	—	—
St. Mary's Hospital	80	137	114	*3*	331	—	4	—	—	4	—	1	—	—	1
Manchester Royal Infirmary	275	620	82	*1*	977	—	—	—	—	—	—	—	—	—	—
Two Maternity and Child Welfare Centres	51	107	—	*3*	158	—	24	—	—	24	—	—	—	—	—
Total work done at Public Health Laboratory	924	2,234	466	*33*	3,624	53	299	40	—	392	3	7	—	—	10
B. Work done by Hospital Pathologist :—															
Ancoats Hospital		Not	stated		1,116		Not	stated		852		Not	stated		1
Manchester and Salford Hospital for Skin Diseases		Not	stated		884	—	—	—	—	—		Not	stated		30
C. Work done by Clinical Pathologist at Clinics :—															
Manchester Royal Infirmary	—	—	—	—	—		Not	stated		833		Not	stated		78
St. Mary's Hospital	—	—	—	—	—	—	—	—	—	724		Not	stated		3
St. Luke's Hospital	—	—	—	—	—	—	—	—	—	1,085		Not	stated		88
Total of A, B, and C	—	—	—	—	5,624	—	—	—	—	3,886	—	—	—	—	210

Clinics in connection with the Maternity and Child Welfare Centres.

t two of the Maternity and Child Welfare Centres cases of venereal disease treated at pre-maternity clinics. The treatment is given by Medical Officers the Maternity and Child Welfare Staff. One clinic is held at each centre h week.

Auxiliary Centre for Females at Monsall Hospital.

n auxiliary centre for the intermediate treatment of females is provided at nsall Hospital. The treatment is given by an experienced nurse, whose k is supervised by a lady medical officer. This centre is open for treatment ly.

TABLE II.

tatement showing the services rendered in the Manchester Treatment tres during the year, classified according as to whether they are Manchester es or patients residing in other districts :—

ame of County or County Borough (or Country in the case of persons residing elsewhere than in England and Wales) to be inserted in these headings	Manchester Cases only	Other Districts	Total	
Number of persons from each area dealt with during the year *for the first time* and found to be suffering from :—				
Syphilis..	1,083	475	1,558	
Soft Chancre	50	35	85	
Gonorrhœa	1,099	442	1,541	
Conditions other than Venereal	855	267	1,122	
Total	3,087	1,219	4,306	
Clinic..	34,485	14,904	49,389	70,237
Total number of attendances of all patients residing in each area :—				
Intermediate	17,679	4,169	20,848	
Aggregate number of " In-patient days " of all patients residing in each area.. ..	3,538	1,143	4,681	
Number of doses of arsenobenzol compounds given in the :— to patients residing in each area: 1. Out-patient Clinic .	6,010½	2,370	8,380½	
2. In-patient Dept. ..	92	50	142	

Table III. is a statement showing the pathological work done in connection th the venereal disease scheme during 1923.

Publicity and Propaganda Work.

During the first six months of the year this work was carried out by tl Local Branch of the National Council for Combating Venereal Disease Thirty-three lectures were given—20 medical and 13 social.

After June 25th the Local Branch of the National Council for Combatir Venereal Diseases was discontinued, and its work was undertaken by a Sul Committee of the Public Health Committee. Nine lectures were given in tl second half of the year—5 were medical and 4 were social.

In the month of November a propaganda fortnight was organised, durir which period cinematograph lectures were given at 14 of the town halls in tl City, and approximately 9,000 people attended these lectures, and much usef educational work was done.

Lectures continue to be given at working men's clubs, social and politic organisations, women's co-operative guilds, and schools for mothers.

No action under the Venereal Disease Act, 1917, has been taken durin the year.

Table II.

Statement showing the services rendered in the Manchester Treatmen Centres during the year, classified according as to whether they are Manchest cases or patients residing in other districts :—

Name of County or County Borough (or Country in the case of persons residing elsewhere than in England and Wales) to be inserted in these headings	Manchester Cases only	Other Districts	Total
A. Number of persons from each area dealt with during the year *for the first time* and found to be suffering from :—			
Syphilis	865	388	1,243
Soft Chancre	53	29	82
Gonorrhœa	1,023	454	1,477
Conditions other than Venereal.. ..	690	312	1,002
Total	2,631	1,173	3,804
Clinic	31,281	13,593	44,874
B. Total number of attendances of all patients residing in each area :—			
Intermediate	17,389	2,993	20,382
C. Aggregate number of " In-patient days " of all patients residing in each area ..	2,251	1,033	3,284
D. Number of doses of arsenobenzol compounds given in the :— to patients residing in each area — 1. Out-patient Clinic.	5,399	2,104	7,503
2. In-patient Dept. ..	53	33	86

STATISTICS FOR 1924.

A summary showing the work done at :—

(1) The Manchester Royal Infirmary ;
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(6) Higher Ardwick Child Welfare Centre ;
(7) Lower Moss Lane Child Welfare Centre ; and
(8) The Auxiliary Centre for Females at Monsall Hospital (attendances only) ;

is given in the following Table :—

TABLE I.

	Syphilis		Soft Chancre		Gonorrhœa		Conditions other than Venereal		Total	
	Males	Females	Males	Females	Males	Females	Males	Females	Males	Females
Number of persons who, on the 1st January, 1924, were under treatment or observation for	1,134	875	25	—	1,401	188	27	100	2,587	1,163
Number dealt with during the year *for the first time* and found to be suffering from :—										
Syphilis only	772	464	—	—	—	—	—	—	772	464
Soft Chancre only	—	—	82	—	—	—	—	—	82	—
Gonorrhœa only	—	—	—	—	1,260	210	—	—	1,260	210
§Syphilis and Soft Chancre	—	—	—	—	—	—	—	—	—	—
§Syphilis and Gonorrhœa	3	4	—	—	3	4	—	—	6	8
§Gonorrhœa and Soft Chancre	—	—	—	—	—	—	—	—	—	—
§Syphilis, Soft Chancre, and Gonorrhœa . .	—	—	—	—	—	—	—	—	—	—
Conditions other than Venereal	—	—	—	—	—	—	613	389	613	389
Total—Item 2	775	468	82	—	1,263	214	613	389	2,733	1,071
Total—Items 1 and 2	1,909	1,343	107	—	2,664	402	640	489	5,320	2,234
Number of persons who ceased to attend—										
(*a*) Before completing the first course of treatment for	262	189	6	—	590	87	3	38	861	314
(*b*) After one or more courses, but before completion of treatment for	100	99	—	—	—	—	—	—	100	99
(*c*) After completion of treatment, but before final tests as to cure of . .	138	64	—	—	108	17	—	—	246	81
4. Number of persons transferred to other Treatment Centres after treatment for . .	80	38	1	—	107	21	1	6	189	65
5. Number of persons discharged after completion of treatment and observation for	200	71	72	—	294	56	624	357	1,190	484
6. Number of persons who, on the 1st January, 1925, were under treatment or observation for	1,129	882	28	—	1,565	221	12	88	2,734	1,191
Total—Items 3, 4, 5, and 6	1,909	1,343	107	—	2,664	402	640	489	5,320	2,234
7. Out-patient attendances—										
(*a*) For individual attention by the Medical Officer	13,403	11,737	269	—	13,515	3,024	1,254	1,672	28,441	16,433
(*b*) For intermediate treatment — *e.g.*, irrigation, dressings, etc.	779	—	2,034	—	13,078	4,335	—	156	15,891	4,491
Total attendances	14,182	11,737	2,303	—	26,593	7,359	1,254	1,828	41,332	20,924
Aggregate number of "In-patient days" of treatment given to persons who were suffering from	596	161	9	—	622	1,609	54	233	1,281	2,003

	For detection of			For Wassermann Reaction
	Spirochetes	Gonococci	Other Organisms	
Examinations of Pathological material :—				
(*a*) Specimens which were examined at, and by the Medical Officer of, the Treatment Centre	136	3,674	12	1,795
(*b*) Specimens from persons attending at the Treatment Centre which were sent for examination to an approved laboratory . .	—	136	1	2,009

TABLE III.

VENEREAL DISEASES—PATHOLOGICAL WORK DONE DURING 1924.

	Wassermann Reaction					Gonococci					Spirochaetes				
	Positive	Negative	Doubtful	Unsatis-factory Specimens	Total Examined	Positive	Negative	Doubtful	Unsatis-factory Specimens	Total Examined	Positive	Negative	Doubtful	Unsatis-factory Specimens	Total Examined
A. Work done at the Public Health Laboratory (University Bacteriological Department) :—															
Medical Practitioners	156	492	19	*5*	667	37	88	—	—	125	1	4	1	—	6
Institutions other than Approved Centres	182	433	26	*12*	641	11	50	—	—	61	—	—	—	—	—
St. Luke's Hospital	95	569	26	*20*	690	—	—	—	—	—	—	—	—	—	—
St. Mary's Hospital	58	205	8	*3*	271	—	65	—	—	65	—	—	—	—	—
Manchester Royal Infirmary	219	631	40	—	890	—	—	—	—	—	—	—	—	—	—
Two Maternity and Child Welfare Centres	37	108	4	*4*	149	3	43	—	—	46	—	—	—	—	—
Total work done at Public Health Laboratory	747	2,438	123	*44*	3,308	51	246	—	—	297	1	4	1	—	6
B. Work done by Hospital Pathologist :—															
Ancoats Hospital		Not	stated		1,153		Not	stated		832		Not	stated		1
Manchester and Salford Hospital for Skin Diseases		Not	stated		742	—	—	—	—	—		Not	stated		23
C. Work done by Clinical Pathologist at Clinics :—															
Manchester Royal Infirmary	—	—	—	—	—		Not	stated		825		Not	stated		61
St. Mary's Hospital	—	—	—	—	—		Not	stated		528	—	—	—	—	—
St. Luke's Hospital	—	—	—	—	—		Not	stated		1,489		Not	stated		51
Total of A, B, and C	—	—	—	—	5,203	—	—	—	—	3,971	—	—	—	—	142

Table III. is a statement showing the pathological work done in connection with the venereal disease scheme during 1924.

Publicity and Propaganda Work.

The task of enlightening the public has been continued vigorously during the year. Sixty-seven lectures were given—19 to firms of various kinds, and 48 to social organisations.

While the attitude of the general public is still one of indifference and sometimes antipathy towards the discussion of such subjects as sex-hygiene and venereal diseases, it is possible to detect a deepening in the stream of interest, and, in the case of women's organisations, a definite desire to hear more about not only these subjects, but other health topics as well.

In dealing with any propaganda work it is, of course, extremely difficult to point to definite results. It would, however, appear to be impossible to bring such matters before 4,050 people without an increase in the individual and social well-being.

Towards the end of the year arrangements were in progress for a three weeks' Cinematograph Publicity Campaign to be held early in 1925.

As in former years, no action has been taken under the Venereal Disease Act, 1917.

REPORT OF WORK DONE UNDER THE RATS AND MICE (DESTRUCTION) ACT, 1919.

1923.

During the year, 582 premises were inspected, and 668 re-visits were made whilst the work was in progress. Rat proofing and destruction was carried out at 125 premises, and destructive measures only at 183 premises.

At the end of the year repressive measures were in progress at 93 premises.

As a result of the systematic examination of rat infested premises, drainage work has been carried out at 87 premises.

At the end of the year drainage work was in progress at 3 premises; and in connection with 20 other premises, notices to repair defective drains had been issued or were in course of preparation.

The various departments of the Corporation have carried out rat destructi on lands and buildings under their control with the following results :—

42,279 poison baits and 100 tins of virus laid.

34,564 poison baits and 98 tins of virus taken.

22 dead rats found, and 2,556 rats killed by other methods.

478 mice have also been destroyed.

Two firms of vermin exterminators have certified to the destruction l them of 9,528 rats upon other lands and buildings in the City.

414 letters have been sent out during the year, chiefly to occupiers ar owners, specifying the work necessary at infested premises.

One Rat Week was held, which was advertised and carried out in the usu manner.

Mr. Isaac Priestley was appointed Rat Executive Officer in Novembe Mr. John Potts having resigned.

1924.

There has been a considerable increase in this work during the year.

1,432 premises have been inspected. Of these, 355 were found not to l infested, and in 460 premises the infestation was confined to the yards an passages. 983 re-visits have been made during the progress of the worl Rat proofing and destruction have been carried out at 328 premises, an destructive measures only at 178 premises. This is in addition to rat destructio at two large housing estates belonging to the Corporation.

At the end of the year repressive measures were in progress at 227 premise

As the result of systematic examination of rat infested premises, drainag work has been carried out at 213 premises.

At the end of the year drainage work was in progress at 40 premises, and i connection with 316 other premises notices to repair defective drains had bee issued or were in course of preparation.

The Paving and Highways Department have, in conjunction with the Ra Executive Officer, made 59 examinations of undermined portions of street and passages, and in 58 cases, where the undermining was found to be du to rats, have carried out remedial measures.

The various departments of the Corporation have carried out rat destructio on lands and buildings under their control with the following results :—

36,725 poison baits and 189 tins of virus laid.

27,075 poison baits and 189 tins of virus taken.

4 dead rats were found, and 1,645 rats were killed by other methods

324 mice were destroyed.

Two firms of vermin exterminators have certified to the destruction by em of 9,863 rats upon lands and buildings in the City.

615 letters have been sent out during the year, chiefly to occupiers and ners, specifying work required at infested premises.

One Rat Week was held, which was advertised and conducted in the usual anner.

Two notices under the Rats and Mice (Destruction) Act, 1919, have been rved upon occupiers of infested premises. In both cases rat-catchers have en employed for rat destruction, but the work of rat proofing is held in eyance pending the removal of disused drains which have been the source infestation.

NATURE OF PREMISES INFESTED DURING 1924.

Particulars	Internal	Yards and Passages only
otels, restaurants, cafes, clubs, beer-houses, supper bars, tripe shops, etc.	23	6
aughter-houses, piggeries, farms, stables	6	3
itchers, greengrocers, fish and poultry dealers	21	3
ain and provision warehouses, grocery, confectionery, bakeries	26	7
arine stores, rag stores, rabbit skin stores, tips, vacant lands	11	—
oth, hosiery, and general warehouses, outfitters, drapers, furriers, milliners, waterproofs, laundries, chemists, tailors, boots and shoes	83	8
on works, engineering works, hardware, furniture, box-making, etc.	17	6
inters, stationers, hairdressers, tobacconists	14	3
ospitals and colleges	3	—
nks and offices	12	1
tton mills, bleach works, dye works, etc.	6	—
scellaneous	7	6
velling-houses	388	417
Totals	617	460

The Rat Executive Officer (Mr. Priestley) has also carried out the follow work in connection with other sections of the Public Health Department

Maternity and Child Welfare Section	Inspection of Maternity Homes	43
	Inspection of premises other than maternity homes	28
	Preparation of reports and plans of maternity homes, etc.	57
Sanitary Section ..	Inspection of houses-let-in lodgings	71

TUBERCULOSIS.

The Senior Tuberculosis Officer's Report.

The primary notifications of pulmonary tuberculosis during 1923 we females—592, and males—852.

The number of cases of surgical tuberculosis were, females—380, a males—350.

The pulmonary cases were not very different in numbers from those of preceding year, a slight reduction being noted.

It was to be expected that a halt in the diminishing notifications would oc as a consequence of the overcrowding, unemployment, and poverty whi have been present for the past few years. Conditions of hardship a unsatisfactory housing are associated with the increased prevalence of pulmona tuberculosis. This has been referred to and illustrated in former repor and in the year 1924 we have the effect as a measurable though small additi to the pulmonary tuberculosis notification rate. It is to be stated, howev that this increase is not reflected in the death rate, which has continued to fa the actual deaths from pulmonary tuberculosis in 1923 being 931, and in 19 906. The death rates corresponding to these figures are: 1923, 1·24 per thousa population; 1924, 1·18 per thousand population.

The general death rate for the City for these years was 13·32 per thousa and 13·95 per thousand respectively.

There is a feature about the notifications which emerges from a closer analys to which reference may be made.

king all forms of tuberculosis, we find that the notifications are approxi-ly equal for the two years. The pulmonary notifications, however, are ased in 1924, whilst the surgical notifications have diminished. Amongst pulmonary cases the increase occurs amongst the females from the ages o 25 inclusive, with a smaller increase between the ages of 35 and 45.

nce this is associated with a diminished death-rate, alternative explanations ossible. We might be at a period when increased resistance to the disease curring, and a balance being established between infection and recovery. is a condition which our Public Heath measures are endeavouring to secure. it is doubtful whether this is a true explanation of the present noted facts. by future observation over a series of years could this be demonstrated.

other view would be that we are on the eve of an increase in the death- which would not be surprising in view of the general social retrogression hich reference has already been made. That conditions of overcrowding hardship affect the female population first is generally accepted, and ther we explain the onset by a new infection, or the lighting up through nished resistance of an old lesion, the fact itself remains.

have accordingly had the figures analysed more closely still in regard to age groups.

a result, it is found that amongst women of the ages mentioned the entage of cases due apparently to infection in the household was 39 per . in 1924. Ten years ago, *i.e.* in 1914, when housing conditions were better general unemployment not so evident, the percentage was 33 per cent.

is is a small difference perhaps, but it points in the direction indicated.

fore leaving the subject of notification, it is again noteworthy to record completeness with which this is carried out in the City. Only 3·5 per cent. ases dying from pulmonary tuberculosis in 1924 were not notified before h. This is a very good figure, and it is gratifying to record it as showing care which the general practitioner observes with regard to this matter.

e co-operation with the medical men continues to be close, and great use ade of the department in securing diagnosis, treatment, etc., for their ents. Cases are sent down freely by them, and over 50 per cent. of the ects, so sent, are found to present evidence of tuberculosis.

has already been stated that the death-rate for pulmonary tuberculosis lling, but that for surgical tuberculosis is slightly higher. The increase is to an increased number of deaths from surgical tuberculosis in children he ages 1 to 4 inclusive, the number being 27 more than in 1923.

As it is recognised that a good deal of this infection is due to b tuberculosis, it is evident that the problem of dealing with the tuberculou still presents a formidable obstacle to progress. When the much ov provision for the treatment of children suffering from tuberculosis is upon an adequate scale, it is to be anticipated that the results of this infe will be materially diminished.

The number of cases treated under the scheme in the various institu during 1924 is seen to be 1,800.

Apart from the general treatment in sanatoria and hospitals, a good de time has been spent in the past few years upon the training of patients a Barrowmore Colony. Many cases have been scrutinised with a view to suitability for this form of treatment, and out of them 110 have been sele At the present moment there are 20 men undergoing training and treat in various branches of work, amongst which may be mentioned carpe gardening, boot repairing and leather work, upholstery, and light farn Six men and their families have been permanently settled upon the es and are forming the nucleus of a village settlement.

It will be seen that the number of cases passing through the office re each year has increased steadily, until it reaches the figure of 9,949 for the The measure of our knowledge of the existence of cases in Manchester, anc work entailed in following them up, may be estimated from this figure.

These figures show the known survival rates to be increasing with f development of the work; they also emphasise the potential danger infection or breakdown under adverse conditions.

Although surviving in apparently greater numbers, immunity is necessarily co-existent, and the balance between resistance and infectio not yet steady.

Much of the work involved in providing for treatment of these case ultimately rendered useless by conditions outside the control of the departm The patients may return to houses quite unsuited to the proper treatmen a disease like tuberculosis. Overcrowding continues to a degree that m isolation often impossible, and makes the probability of the spread of dis very great. Conditions of work are often unsatisfactory, and the mean transport to and from work are another source of danger.

The customary tables and statistics are given in the following pages.

Tables and Statistics for the Year 1923.

Insured cases applying for treatment:—

1914 ..	730	Males.
	321	Females.
1915 ..	572	Males.
	315	Females.
1916 ..	747	Males.
	316	Females.
1917 ..	728	Males.
	359	Females.
1918 ..	642	Males.
	261	Females.
1919 ..	630	Males.
	255	Females.
1920 ..	645	Males.
	250	Females.
1921 ..	615	Males.
	255	Females.
1922 ..	543	Males.
	265	Females.
1923 ..	539	Males.
	291	Females.

ses of discharged soldiers referred for treatment—226.

umber of insured patients who had so far recovered that no active signs isease were found—258.

ecoveries amongst uninsured cases—397.

ntacts examined at their homes and at the Dispensary—701 ; of these ite signs of tuberculosis were found in 33, and in 229 further observation required, as they were suspicious cases of tuberculosis.

rants of food were made in 3,148 instances to 701 families, and 53 grants othing were supplied to 44 patients in Hospital and Sanatorium to enable to derive full benefit from treatment.

edding, bedsteads, and cots, together with nursing appliances, have also loaned in necessitous cases to secure isolation and adequate nursing at e.

ecial visits to the number of 10,286 have been paid by the Tuberculosis ses and 1,427 visits by the Clinical Nurse who attends to domiciliary patients iring surgical dressings and nursing care.

[TABLES 2, 3, AND 4.—*See* 1924 SECTION.]

TABLE 5.

SOURCES OF NOTIFICATION OF TUBERCULOSIS DURING 1923.

Source	Pulmonary	Non-Pulmonary	Total
Crescent Road Institution	69	21	90
Withington Hospital	118	33	151
Booth Hall	49	38	87
Outside Poor Law	3	—	3
Manchester Royal Infirmary	46	125	171
Ancoats Hospital	15	76	91
Skin Hospital	1	48	49
St. Mary's Hospital	5	21	26
Northern Hospital	14	30	44
Jewish Hospital	2	1	3
Pendlebury Hospital	—	8	8
Medical Mission	—	—	—
Hulme Dispensary	2	1	3
Chorlton-upon-Medlock Dispensary	—	—	—
Gartside Street Dispensary	13	71	84
Hardman Street Dispensary	304	21	325
Bowdon Hospital	3	3	6
Asylums	26	—	26
Schools	7	34	41
Tuberculosis Staff	47	20	67
Military	11	7	18
Various Sources	50	20	70
Private Practitioners	659	152	811
Total	1,444	730	2,174

[TABLES 7, 8, AND 9.—*See* 1924 SECTION.]

512 tenants have allowed the removal of bedding, etc., for disinfection have themselves burned it in a few instances.

66,690 cardboard boxes have been prepared in the office and supplie patients for spitting purposes in the home.

688 spit bottles have been supplied for use outside the house.

12,724 visits have been made by the Enquiry Officers during the year.

36,484 letters were sent out.

960 notices warning against spitting on floors, etc., have been supplie offices and workshops.

TABLE I.

NOTIFICATIONS—1923.

	NOTIFICATIONS ON FORM A, ETC.												Total Notifications on Form A etc.	NOTIFICATIONS ON FORM B				Total Notifications on Form B	NOTIFICATIONS ON FORM C	
	Number of Primary Notifications													Number of Primary Notifications					Poor Law Institutions	Sanatoria
Age Periods	0–	1–	5–	10–	15–	20–	25–	35–	45–	55–	65–	Total Primary Notifications		Under 5	5–	10 to 15	Total Primary Notifications			
Pulmonary Males	3	15	48	39	80	70	153	179	152	82	28	849	1,075	—	1	2	3	4	216	815
„ Females	—	8	53	40	79	90	141	94	55	24	4	588	736	—	1	3	4	7	71	430
Non-Pulmonary Males	9	70	72	58	34	27	20	18	13	10	4	335	452	—	9	6	15	24	15	83
„ Females ..	9	53	72	64	52	31	29	23	16	11	1	361	459	1	10	8	19	29	12	79
Totals..	21	146	245	201	245	218	343	314	236	127	37	2,133	2,722	1	21	19	41	64	314	1,407

Table 6.

Tuberculosis (Non-Pulmonary).—Primary Cases Notified during 1923.

Location of Disease	Age Groups																				Totals	
	0—		5—		10—		15—		20—		25—		35—		45—		55—		65—			
	Males	Females	Males	Females	Males	Females	Males	Females	Males	Females	Males	Females	Males	Females	Males	Females	Males	Females	Males	Females	Males	Females
Brain :—Tumour	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Meninges..	13	19	6	8	—	2	—	3	—	—	2	—	—	1	1	1	—	—	—	—	22	34
Hydrocephalus	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Glands :—Cervical	20	10	26	36	26	34	13	14	8	8	3	11	4	5	3	1	3	2	—	1	106	122
Mesenteric	2	—	4	1	1	—	—	1	1	2	—	—	1	1	—	—	—	—	—	—	9	5
Axillary	1	—	—	1	—	—	—	—	—	—	—	1	—	—	—	1	1	—	—	—	2	3
Inguinal	—	—	—	—	—	—	—	—	—	1	1	—	—	—	—	1	—	—	1	—	2	2
Tuberculous Peritonitis	13	7	6	6	9	4	3	9	2	4	1	—	1	—	1	—	—	1	—	—	36	31
Tuberculosis of Abdomen	14	7	9	6	3	6	1	4	—	—	—	2	—	2	—	1	—	—	—	—	27	28
,, of Mediast. and Bron.	—	—	6	4	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	6	6
,, of Pleura	—	—	1	—	3	—	2	2	5	2	—	2	2	1	—	—	—	—	—	—	13	7
,, of Breast	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	1
,, of Intestines	—	3	—	1	—	—	1	—	—	—	—	—	—	1	—	1	—	—	—	—	1	6
Joints :—Spine	2	2	5	1	5	1	—	3	1	2	5	3	1	2	1	2	—	1	—	—	20	17
Hip	1	1	3	1	7	7	2	1	1	1	1	2	1	1	1	2	1	—	—	—	18	16
Elbow	—	—	—	3	—	—	2	—	—	—	—	—	—	—	—	1	1	1	—	—	3	5
Ankle	1	4	1	1	1	—	1	—	—	1	1	—	—	—	—	—	—	2	—	—	5	8
Wrist	—	—	—	—	—	—	1	1	—	—	—	—	1	—	1	—	—	—	1	—	4	1
Shoulder	—	—	1	1	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	1	2
Knee	—	—	2	4	1	1	1	4	—	2	—	1	—	2	—	—	1	2	—	—	5	16
Bones :—Various	3	4	2	3	2	3	4	4	2	1	1	3	1	1	2	—	—	—	1	—	18	19
Tuberculosis of Skin	2	2	4	3	3	9	1	5	3	4	4	4	2	3	—	4	1	2	1	—	21	36
General Tuberculosis	2	—	2	1	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	5	1
Special Organs :—Ear	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Nose	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Bladder, etc. ..	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Kidney	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	1	—	—	—	—	1	1
Testicle, etc. ..	—	—	—	—	1	—	—	—	1	—	—	—	3	—	2	—	1	—	—	—	8	—
Muscles, etc. ..	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Pharynx	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Rectum	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Unclassified	5	3	3	—	1	2	3	—	2	2	—	—	1	3	1	—	1	—	—	—	17	10
Totals	79	63	81	82	63	71	35	53	27	31	20	29	18	23	13	16	10	11	4	1	350	380

The number of cases of Tuberculosis in which the income of the individual or family showed varying amounts of deficit under an assumed standard of living, and the number in which assistance was given to the individual or the family, or both, is shown in the following tables :—

TABLE 10.

TABLE SHOWING PARTICULARS OF DISTRESS IN CASES OF TUBERCULOSIS NOTIFIED DURING THE YEAR 1923. CLASSIFIED ACCORDING TO THE REQUIREMENTS OF THE FAMILY IN EXCESS OF THE INCOME. FOOD, CALCULATED ON THE ATWATER SCALE; HOUSEHOLD SUNDRIES ON MR. ROWNTREE'S SCALE. TAKING THE UNITS OF FOOD AND HOUSEHOLD SUNDRIES USED IN 1913 AS STANDARDS, VARIOUS AMOUNTS HAVE BEEN USED. IN 1922 THE AMOUNT ADDED WAS 125 PER CENT., REDUCED LATER TO 100, AND THEN TO 90 PER CENT. THROUGHOUT 1923 THE AMOUNT ADDED WAS 90 PER CENT.

PULMONARY CASES.

Conditions affecting Individual Cases	Shortage up to—in Shillings.													
	—5/-	—10/-	—11/-	—12/-	—13/-	—14/-	—15/-	—16/-	—17/-	—18/-	—19/-	—20/-	—25/- +	Total
Living December 31st, 1923 ..	59	49	7	7	6	3	3	5	—	3	3	—	10	155
Dead December 31st, 1923 ..	20	15	2	1	2	2	—	1	2	2	1	2	15	65
Relief from Guardians	28	19	3	—	1	—	—	1	—	3	—	—	5	60
Assistance from the £2,500 Grant (Family)	34	31	6	4	3	3	2	—	1	2	1	1	4	92
Assistance from the £1,500 Grant (Individual)	23	17	1	1	1	1	—	1	—	1	—	—	2	48

TABLE 11.

NON-PULMONARY CASES.

Conditions affecting Individual Cases	Shortage up to—in Shillings.													
	—5/-	—10/-	—11/-	—12/-	—13/-	—14/-	—15/-	—16/-	—17/-	—18/-	—19/-	—20/-	—25/- +	Total
Living December 31st, 1923 ..	23	28	1	5	2	1	2	2	1	—	2	—	7	74
Dead December 31st, 1923 ..	6	5	—	—	—	—	—	2	—	—	—	—	2	15
Relief from Guardians	7	8	—	1	—	1	—	—	—	—	1	—	4	22
Assistance from £2,500	6	17	—	3	1	1	1	1	—	—	1	—	3	34
Assistance from £1,500	10	10	1	1	1	—	—	1	—	—	—	—	—	24

With reference to Tables 10 and 11 it should be noted that Corporation assistance can only be given in cases which do not fall into the category of destitution.

[Table 12—*See* 1924 Section.]

TABLE 13.

NOTIFICATIONS OF PULMONARY AND NON-PULMONARY TUBERCULOSIS RECEIVED FROM SANITARY AREAS DURING 1923.

Statistical Divisions	Pulmonary	Non-Pulmonary	Totals
City of Manchester	1,444	730	2,174
I. Manchester Township	315	145	460
II. North Manchester	342	222	564
III. South Manchester	787	363	1,150
Ancoats	128	60	188
Central	50	15	65
St. George's	137	70	207
Cheetham	68	34	102
Crumpsall	14	14	28
Blackley	20	23	43
Harpurhey	38	18	56
Moston	38	19	57
Newton	68	37	105
Bradford	40	41	81
Beswick	28	17	45
Clayton	28	19	47
Ardwick..	97	38	135
Openshaw	63	42	105
West Gorton	61	22	83
Rusholme and Kirkmanshulme..	78	20	98
Chorlton-upon-Medlock	126	45	171
Hulme	134	91	225
Moss Side	57	18	75
Withington	60	41	101
Gorton	74	34	108
Levenshulme	37	12	49

TABLE A.

SUMMARY OF PRIMARY EXAMINATIONS MADE BY THE SENIOR TUBERCULOSIS OFFICER AND ASSISTANT TUBERCULOSIS OFFICERS IN 1923.

	Reason for Examination				Occupational Condition at Examination		Diagnosis															Recommendations made						
							Pulmonary Tuberculosis			Tuberculosis of																		
	Treatment	Claimed Recovery	Diagnosis	Contacts	Working (or at School)	Not Working	Stage I.	Stage II.	Stage III.	Larynx	Bones and Joints	Glands	Abdomen	Other Organs	Doubtful Tuberculosis	Bronchitis	Heart Lesions	Other Diseases	No evidence of Tuberculosis	Recovery	No Disease	Delamere and Abergele	Baguley	Hardman Street Dispensary	Union	Other Hospitals	Private Practitioners	Observation
Males ..	170	6	160	27	113	250	55	52	50	5	16	21	6	16	41	47	5	37	78	13	41	43	74	17	7	49	95	24
Females	132	9	65	66	151	121	30	28	32	2	15	20	7	32	43	19	2	29	45	7	38	25	44	4	2	59	60	33
Children.	173	31	25	177	210	196	10	9	4	1	33	69	19	28	100	29	1	45	86	30	78	5	2	25	12	147	19	88
Totals ..	1,041				1,041		*1,167													1,041								

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* Total of "diseases" as distinct from total cases examined, *i.e.*, several patients had more than one form of disease present.

Table B.—Result of Examination of Cases sent for Diagnosis, 1923.

	Pulmonary Tuberculosis			Tuberculosis of					Doubtful Tuber-culosis	No evidence of Tuber-culosis	Bron-chitis	Heart Lesions	Other Diseases
	Stage I.	Stage II.	Stage III.	Larynx	Bones and Joints	Glands	Abdo-men	Other Organs					
Males	25	9	19	3	—	2	—	2	26	59	37	5	25
Females	13	8	3	—	1	—	—	—	16	23	11	2	9
Children	1	1	1	—	—	4	1	1	2	9	7	—	5

Table C.—Result of Examination of Contacts.

Males	1	—	—	—	2	—	—	—	2	17	5	—	4
Females	1	1	—	—	—	1	—	—	19	36	6	—	15
Children	2	1	1	1	—	6	—	—	73	73	18	1	37

TABLE D.—DISPENSARY RETURN, 1923.

Number of persons, including Contacts, who were examined for the first time during the period from January 1st to December 31st, 1923, at or in connection with the Dispensary or Visiting Station, and were					Number of persons diagnosed to be suffering from Tuberculosis who were treated or supervised at or in connection with the Dispensary or Visiting Station during the period from January 1st to December 31st, 1923		Number of persons who were under treatment, supervision, or observation at or in connection with the Dispensary or Visiting Station on December 31st, 1923	
Diagnosed as suffering from Tuberculosis	Diagnosed as *not* suffering from Tuberculosis	Undiagnosed and remaining under observation	Total number examined					
			Insured	Uninsured	Insured	Uninsured	Insured	Uninsured
1,273	1,809	359	625	2,816	95	971	48	510

TABLE E.—INSURED CASES TREATED IN 1923.

Residential	1,271
Dispensary	95
Domiciliary	2,257
Total	3,623

ANALYSIS OF CASES TREATED.

TABLE I.—*Residential* (*Insured*).

NSTITUTION	Total Cases Treated (1) Males	Total Cases Treated (1) Females	Discharged from Institutions Improved (2)	Discharged from Institutions Without Improvement (3)	Died (4)	*Residential Treatment discontinued in other cases (5)	Still under Residential Treatment on 1st Jan., 1924 (6)
			Pulmonary				
.. ..	566		193	82	118	3	170
		193	62	21	40	10	60
.. ..	153		84	25	3	10	31
		133	79	20	1	5	28
.. ..	97		51	11	—	5	30
		20	10	3	—	—	7
ulmonary	816	346	479	162	162	33	326
			Non-Pulmonary				
er Royal Infirmary ..	22		18	—	1	—	3
		13	8	—	1	1	3
pital	6		6	—	—	—	—
		4	4	—	—	—	—
ospital	8		8	—	—	—	—
		6	6	—	—	—	—
on-Pulmonary	36	23	50	—	2	1	6
LL FORMS	852	369	529	162	164	34	332

figures in column (5) relate to cases as to the progress of which no definite report is
le for various reasons—*e.g.*, the withdrawal from the Institution of the insured persons
ves before the expiration of the period for which they were nominated for the treatment.

dition to the above cases, 51 ex-service men have been admitted to the East Lancashire
g Colony, Barrowmore Hall, for treatment combined with training.

TABLE II.—*Residential* (*Uninsured*).

INSTITUTION	Total Cases Treated (1) Males	Females	Children	Discharged from Institutions: Improved (2)	Without Improvement (3)	Died (4)	*Residential Treatment discontinued in other cases (5)	St Re Ti on
			Pulmonary					
Baguley	128			47	13	30	—	
		113		34	18	27	6	
			—	—	—	—	—	
Crossley	35			23	5	—	1	
		50	—	35	5	—	2	
			—	—	—	—	—	
Abergele	22			13	2	—	1	
		9		5	1	—	—	
			15	3	2	—	—	
Total Pulmonary..	185	172	15	160	46	57	10	
			Non-Pulmonary					
Manchester Royal Infirmary	3			3	—	—	—	
		3		3	—	—	—	
			26	21	2	—	—	
Skin Hospital	—			—	—	—	—	
		3		3	—	—	—	
			9	9	—	—	—	
Ancoats Hospital ..	2			2	—	—	—	
		3		2	—	—	—	
			37	34	1	—	—	
Total Non-Pulmonary	5	9	72	77	3	—	—	
TOTAL—ALL FORMS..	190	181	87	237	49	57	10	

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* The figures in column (5) relate to cases of which no definite report is available for v reasons—*e.g.*, the withdrawal from the Institution of the persons themselves before the expi of the period for which they were nominated for the treatment.

TABLE III.—*Dispensary (Insured).*

	Total cases treated (1)	Discharged from Institution: Improved (2)	Discharged from Institution: Without Improvement (3)	Died (4)	* Treatment discontinued in other cases (5)	Still under treatment on 1st January, 1924 (6)
en	67	16	10	1	7	33
omen	28	6	5	—	2	15
Totals	95	22	15	1	9	48

* See footnote to table I.

TABLE IV.—*Dispensary (Uninsured).*

	Total cases treated (1)	Discharged from Institution: Improved (2)	Discharged from Institution: Without Improvement (3)	Died (4)	Still under treatment on 1st January, 1924 (5)
en	120	35	43	—	38
omen	364	105	92	—	176
hildren (under 16) ..	487	126	60	—	296
Totals	971	266	195	—	510

Under the Corporation scheme patients suffering from surgical tuberculosis ave received treatment at the Manchester Royal Infirmary and Ancoats ospital, and cases of tuberculosis of the skin have been treated at the Skin ospital.

The types of case are summarised below.

Bones and Joints	36
Glands	73
Genito-Urinary Tract	5
Abdomen	10
Lupus Vulgaris	228
Toxi-Tuberculids	3
Bazins Disease	6
Tuberculous Ulceration of Skin.	19
Tenosynovitis	1

Insured cases applying for treatment :—

1914 ..	730	Males.
	321	Females.
1915 ..	572	Males.
	315	Females.
1916 ..	747	Males.
	316	Females.
1917 ..	728	Males.
	359	Females.
1918 ..	642	Males.
	261	Females.
1919 ..	630	Males.
	255	Females.
1920 ..	645	Males.
	250	Females.
1921 ..	615	Males.
	255	Females.
1922 ..	543	Males.
	265	Females.
1923 ..	539	Males.
	291	Females.
1924 ..	597	Males.
	371	Females.

Cases of discharged soldiers referred for treatment—347.

Number of insured patients who had so far recovered that no active sig of disease were found—322.

Recoveries amongst uninsured cases—655.

Contacts examined at their homes and at the Dispensary—794 ; of thes definite signs of tuberculosis were found in 57, and in 213 further observatio was required, as they were suspicious cases of tuberculosis.

Grants of food were made in 2,548 instances to 601 families, and 88 gran of clothing were supplied to 64 patients in Hospital and Sanatorium to enab them to derive full benefit from treatment.

Special visits to the number of 10,509 have been paid by the Tuberculos Nurses and 1,276 visits by the Clinical Nurse who attends to domiciliary patien requiring surgical dressings and nursing care.

TABLE 1.

NOTIFICATIONS—1924.

	NOTIFICATIONS ON FORM A, ETC.												Total Notifications on Form A etc.	NOTIFICATIONS ON FORM B				Total Notifications on Form B	NOTIFICATIONS ON FORM C, ETC.	
	Number of Primary Notifications													Number of Primary Notifications						
Age Periods	0–	1–	5–	10–	15–	20–	25–	35–	45–	55–	65–	Total Primary Notifications		Under 5	5–	10 to 15	Total Primary Notifications		Poor Law Institutions	Sanatoria
Pulmonary Males	—	16	41	38	72	64	153	189	185	67	15	840	1,069	—	—	—	—	5	249	760
„ Females	2	14	37	51	102	111	144	109	52	30	13	665	880	—	3	1	4	6	113	487
Non-Pulmonary Males	9	69	70	47	46	23	20	6	6	3	3	302	416	—	12	2	14	20	13	97
„ Females ..	11	57	41	50	45	26	29	19	8	4	8	298	385	1	5	3	9	19	29	93
Totals..	22	156	189	186	265	224	346	323	251	104	39	2,105	2,750	1	20	6	27	50	404	1,437

NOTIFICATION OF TUBERCULOSIS.

TABLE 2.

PHTHISIS—NUMBER OF NEW CASES OF PULMONARY TUBERCULOSIS NOTIFIED DURING THE YEARS 1900 TO 1924.

Year	Poor-law Cases	Institutions	Private Practitioners	Total
(1) 1900*	578	455	540	1573
1901	625	373	341	1339
1902	667	305	303	1275
1903	556	550	251	1357
1904	512	440	250	1202
1905	527	588	291	1406
1906	565	510	304	1379
1907	634	646	310	1590
(2) 1908	659	498	346	1503
1909	681	542	384	1607
1910	543	760	356	1659
(3) 1911	517	897	423	1837
(4) 1912	488	947	969	2404
(5) 1913	345	717	1350	2412
1914	483	877	1304	2664
1915	279	740	1194	2213
1916	322	817	1410	2549
1917	470	716	1061	2247
1918	268	563	1015	1846
1919	208	538	845	1591
1920	206	629	672	1507
1921	257	632	722	1611
1922	233	567	656	1456
1923	239	546	659	1444
1924	223	555	731	1509
Total	11085	15408	16687	43180

* This table does not include 425 cases notified in 1899.

(1). Voluntary notification of Pulmonary Tuberculosis, Manchester scheme.

(2). Compulsory notification (Tuberculosis Regulations) from Poor Law institutions.

(3). Compulsory notification from voluntary institutions.

(4). Compulsory notification of Pulmonary Tuberculosis by all practitioners.

(5). Compulsory notification of all forms of Tuberculosis.

Table 3.

New Cases of Non-Pulmonary Tuberculosis notified during t
Years 1913-1924, the Order of the Local Government Boa
taking effect in February, 1913. (Males and Females.)

Year	Total	
	Males	Females
1913	759	714
1914	519	413
1915	422	415
1916	418	467
1917	433	449
1918	345	353
1919	206	228
1920	280	257
1921	295	281
1922	321	284
1923	350	380
1924	316	307
Total	4,664	4,548

TABLE 4.

PRIMARY NOTIFICATIONS AND DEATHS FROM PULMONARY AND NON-PULMONARY TUBERCULOSIS, 1917-1924.

Pulmonary Tuberculosis	0–	1–	5–	10–	15–	20–	25–	35–	45–	55–	65–	TOTAL	
												Notifications	Deaths
Notifications, 1917	12	65	152	166	194	185	410	432	335	181	104	2,236	
Deaths, ,, ...	4	20	20	42	110	109	189	273	237	121	71		1,196
Notifications, 1918	1	46	106	115	200	177	373	352	278	136	54	1,838	
Deaths, ,, ...	3	19	16	41	100	84	197	237	230	129	47		1,103
Notifications, 1919	2	44	118	120	169	154	280	324	214	112	53	1,590	
Deaths, ,, ...	2	14	19	26	88	92	162	212	195	100	41		951
Notifications, 1920	3	22	98	96	142	154	279	300	231	107	38	1,470	
Deaths, ,, ...	4	3	6	27	73	74	152	205	201	90	33		868
Notifications, 1921	10	39	104	99	137	168	317	302	263	113	46	1,598	
Deaths, ,, ...	4	16	7	18	110	102	160	232	200	83	35		967
Notifications, 1922	6	38	107	92	138	148	288	293	216	91	39	1,456	
Deaths, ,, ...	5	15	7	14	74	117	191	202	185	96	41		947
Notifications, 1923	3	23	103	84	159	160	294	273	207	106	32	1,444	
Deaths, ,, ...	3	12	8	18	96	117	181	190	193	82	31		931
Notifications, 1924	2	30	81	90	174	175	297	298	237	97	28	1,509	
Deaths, ,, ...	3	8	4	13	91	97	168	218	188	86	30		906
Total notifications	39	307	869	862	1313	1321	2538	2574	1981	943	394	13,141	
Total deaths	28	107	87	199	742	792	1400	1769	1629	787	329		7,869

Non-Pulmonary Tuberculosis	0–	1–	5–	10–	15–	20–	25–	35–	45–	55–	65–	TOTAL	
												Notifications	Deaths
Notifications, 1917	32	186	172	169	103	49	62	39	29	21	17	879	
Deaths, ,, ...	49	111	50	42	27	14	25	18	6	9	8		359
Notifications, 1918	13	141	152	125	89	46	42	31	23	21	10	693	
Deaths, ,, ...	23	86	35	37	29	15	12	12	14	14	10		287
Notifications, 1919	23	75	86	74	63	21	31	23	19	10	6	431	
Deaths, ,, ...	24	66	27	34	22	16	12	11	15	6	4		237
Notifications, 1920	19	74	107	92	73	34	40	26	18	13	4	500	
Deaths, ,, ...	22	62	27	27	20	10	16	17	8	7	6		222
Notifications, 1921	16	91	129	97	69	40	43	21	16	15	8	545	
Deaths, ,, ...	20	61	33	31	36	15	20	18	12	5	1		252
Notifications, 1922	13	134	132	112	77	40	33	24	18	9	13	605	
Deaths, ,, ...	28	85	31	23	18	12	8	8	12	6	11		242
Notifications, 1923	18	124	163	136	86	58	49	41	29	21	5	730	
Deaths, ,, ...	26	55	23	20	24	17	11	15	16	7	7		221
Notifications, 1924	20	127	128	102	91	49	49	25	14	7	11	623	
Deaths, ,, ...	24	82	17	23	27	18	13	7	10	6	2		229
Total notifications	154	952	1069	907	651	337	349	230	166	117	74	5,006	
Total deaths	216	608	243	237	203	117	117	106	93	60	49		2,049

NE

Table 6.

Tuberculosis (Non-Pulmonary).—Primary Cases Notified during 1924.

Location of Disease	Age Groups																				Totals	
	0—		5—		10—		15—		20—		25—		35—		45—		55—		65—			
	Males	Females	Males	Females	Males	Females	Males	Females	Males	Females	Males	Females	Males	Females	Males	Females	Males	Females	Males	Females	Males	Females
Brain :—Tumour	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Meninges	21	15	3	3	4	1	4	3	—	1	1	—	—	—	—	—	—	—	—	—	33	23
Hydrocephalus	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Glands :—Cervical	21	17	32	20	17	33	14	16	7	8	4	19	2	4	1	2	—	1	—	1	98	121
Mesenteric	2	1	2	2	3	2	—	1	—	1	—	—	—	—	—	—	—	—	—	—	7	7
Axillary	—	—	—	—	—	—	—	1	1	—	1	—	—	—	—	—	—	—	—	—	2	1
Inguinal	—	—	—	—	2	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	2	1
Tuberculous Peritonitis	9	3	9	6	6	3	4	8	1	5	—	2	—	2	1	—	—	1	—	—	30	30
Tuberculosis of Abdomen	6	4	11	7	3	3	1	—	—	—	—	—	—	1	—	—	—	—	—	—	21	15
,, of Mediast. and Bron.	—	—	5	1	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	6	2
,, of Pleura	—	—	1	—	—	—	1	1	1	—	—	—	1	—	1	—	—	—	—	—	5	1
,, of Breast	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
,, of Intestines	1	2	—	1	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	1	4
Joints :—Spine	2	4	3	3	3	2	5	6	5	—	1	1	—	2	—	—	—	—	1	—	20	18
Hip	3	2	2	—	2	—	1	—	—	—	1	—	1	1	—	—	—	—	—	1	10	4
Elbow	2	—	—	—	—	—	1	1	—	—	—	1	—	—	—	—	—	—	—	—	3	2
Ankle	—	1	1	—	1	—	—	—	1	1	1	—	—	1	—	—	—	—	1	—	5	3
Wrist	—	1	1	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—	—	—	2	2
Shoulder	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Knee	2	1	2	—	1	1	3	1	1	2	—	1	—	1	—	1	—	—	—	—	9	8
Bones :—Various	4	3	3	2	1	1	5	2	1	2	2	2	1	1	2	1	—	—	—	1	19	15
Tuberculosis of Skin	1	5	6	—	4	5	4	2	4	2	4	3	1	5	—	3	2	1	—	4	26	30
General Tuberculosis	3	6	1	1	1	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	7	7
Special Organs :—Ear	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1
Nose	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Bladder, etc.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Kidney	—	—	—	—	—	—	—	—	—	—	2	—	—	—	1	—	1	—	—	—	4	—
Testicle, etc.	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	1	—
Muscles, etc.	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Pharynx	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Rectum	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	1	—
Unclassified	—	1	—	1	—	1	1	2	1	2	—	—	—	—	—	1	—	1	1	1	3	10
Totals	78	68	82	47	49	53	46	45	23	26	20	29	6	19	6	8	3	4	3	8	316	307

NE

Table 5.

Sources of Notification of Tuberculosis During 1924.

Source	Pulmonary	Non-Pulmonary	Totals
escent Road Institution	87	34	121
ithington Hospital	103	29	132
oth Hall	32	47	79
itside Poor Law	1	2	3
anchester Royal Infirmary	36	99	135
icoats Hospital	28	76	104
in Hospital	—	41	41
. Mary's Hospital	14	15	29
orthern Hospital	5	5	10
wish Hospital	8	5	13
ndlebury Hospital	7	8	15
edical Mission	—	—	—
ulme Dispensary	1	—	1
orlton-upon-Medlock Dispensary	—	—	—
irtside Street Dispensary	7	41	48
ardman Street Dispensary	255	11	266
owdon Hospital	10	1	11
sylums	13	2	15
hools	4	23	27
iberculosis Staff	101	19	120
litary	3	1	4
irious Sources	63	14	77
ivate Practitioners	731	150	881
Total	1,509	623	2,132

The Public Health Work is summarised in the following Table and Statement

TABLE 7.—STATISTICS RELATING TO THE NOTIFICATION OF PHTHISIS.

	1924	1923	1922	1921	1920	1919	1918	1917	1916	1915	1914	1901 to 1913	1899 Sep. 1 to Dec. 31, 1900	Total
Cases Visited and Registered—												*Phthisis only*		
Males	1204	1277	1324	1285	1371	1288	1572	1904	2010	1930	2191	13153	1017	31526
Females	1032	1023	1024	928	923	974	1124	1397	1613	1575	1586	8122	732	22053
Totals	2236	2300	2348	2213	2294	2262	2696	3301	3623	3505	3777	21275	1749	53579
Houses Disinfected—														
1. By Corporation—														
(*a*) With solution of chlorinated lime only	0	0	997	2133	2082	2507	2431	2934	635	869	994	8434	581	24597
(*b*) With lime solution only ..	0	0	0	0	0	0	0	0	0	0	0	17	109	126
(*c*) *By Esmarch's method and solution of chlorinated lime	1571	1607	717	0	0	0	0	0	1878	2415	3123	17232	0	28543
Totals	1571	1607	1714	2133	2082	2507	2431	2934	2513	3284	4117	25683	690	53266
2. By Tenants—														
*Esmarch's method or Chlorinated lime, etc.	5647	5885	6268	6157	4891	4633	4167	3523	1799	3580	4564	35620	1299	88033
Totals	7218	7492	7982	8290	6973	7140	6598	6457	4312	6864	8681	61303	1989	141299
Specimens of Sputum Examined—														
Positive	391	558	528	534	437	305	401	465	721	781	1052	6601	104	12878
Negative	1419	1753	1946	1585	1729	1342	1081	1471	1720	1576	2269	12022	154	30067
Totals	1810	2311	2474	2119	2166	1647	1482	1936	2441	2357	3321	18623	258	42945
Cases reported as sent to Hospital..	2077	1942	2052	2139	2153	2035	2315	2400	2078	1719	2718	21678	991	46297
Notified from common lodging-houses	65	84	80	102	115	80	117	143	172	212	283	2922	187	4562

587 tenants have allowed the removal of bedding, etc., for disinfection; or ave themselves burned it in a few instances.

61,056 cardboard boxes have been prepared in the office and supplied to atients for spitting purposes in the home.

745 spit bottles have been supplied for use outside the house.

13,039 visits have been made by the Enquiry Officers during the year.

36,810 letters were sent out.

1,296 notices warning against spitting on floors, etc., have been supplied to ffices and workshops.

The fate of patients treated in the Crossley Sanatorium and Baguley anatorium is set forth in the following tables. Baguley Sanatorium is in he main an institution for advanced cases.

In addition to these, however, cases for observation are sent, and these ay, if suitable, be transferred later to the other sanatoria at Delamere and bergele.

The earlier the stage of the disease at which a patient can be given sanatorium reatment, the greater the prospect of permanent arrest. Properly selected ases have their best chance of arrest in the shortest time by intelligently arried out sanatorium treatment; moreover, they learn restraint, discipline, nd an ordered way of life, which are essentials for maintenance of health nd to prevent relapses.

TABLE 8.

CROSSLEY SANATORIUM.

Males.

Year	No. of new cases	No. of re-admissions	Died in the Sanatorium	Died elsewhere	Lost sight of	Known to be still living, Dec. 31st, 1924
905	16	1	—	11	4	1
906	18	2	1	14	3	—
907	29	2	1	21	4	3
908	36	3	1	26	8	1
909	27	4	2	15	7	3
910	27	5	—	16	7	4
911	38	2	—	26	9	3
912	53	3	1	31	16	5
913	151	3	—	77	46	28
914	184	8	1	81	66	36
915	140	10	3	55	51	31
916	118	8	1	33	33	51
917	113	12	—	39	30	44
918	98	18	—	31	16	51
919	114	24	—	34	18	62
920	105	22	1	27	25	52
921	124	26	2	43	16	63
922	115	28	2	32	18	63
923	125	29	1	21	10	93
924	114	32	1	9	6	98
Total	1,745	242	18	642	393	692

TABLE 8—*continued.*
CROSSLEY SANATORIUM—*continued.*
Females.

Year	No. of new cases	No. of re-admissions	Died in the Sanatorium	Died elsewhere	Lost sight of	Known to still living Dec. 31st 1924
1905	14	—	1	10	2	1
1906	14	1	—	10	3	1
1907	16	2	—	14	1	1
1908	13	3	—	11	2	—
1909	16	1	—	12	1	3
1910	11	4	—	7	3	1
1911	18	2	—	11	2	5
1912	31	3	—	13	14	4
1913	67	—	—	9	38	20
1914	69	5	—	15	33	21
1915	67	5	—	13	33	21
1916	74	3	—	17	34	23
1917	68	5	1	17	19	31
1918	61	9	—	14	18	29
1919	62	5	—	19	14	29
1920	56	8	—	14	12	30
1921	91	12	—	30	16	45
1922	92	13	—	27	16	49
1923	121	24	1	20	17	83
1924	135	25	—	10	13	112
Total	1,096	130	3	293	291	509

TABLE 9.

BAGULEY SANATORIUM.

Males.

Year	No. of new cases	No. of re-admissions	Died in Sanatorium	Died elsewhere	Lost sight of	Known to be still living, Dec. 31st, 1924
1912	49	—	14	25	5	5
1913	329	17	65	169	62	33
1914	246	38	61	133	30	22
1915	276	46	77	141	36	22
1916	403	73	134	173	43	53
1917	401	76	92	137	67	105
1918	390	68	93	134	54	109
1919	445	225	84	120	96	145
1920	475	212	113	155	39	168
1921	349	196	97	123	35	94
1922	356	166	122	108	28	98
1923	365	151	110	79	19	157
1924	363	106	70	40	19	234
Total	4,447	1,374	1,132	1,537	533	1,245

Females.

Year	No. of new cases	No. of re-admissions	Died in Sanatorium	Died elsewhere	Lost sight of	Known to be still living, Dec. 31st, 1924
1912	20	—	3	10	6	1
1913	167	7	32	65	53	17
1914	98	5	17	37	23	21
1915	87	5	23	29	21	14
1916	262	16	66	118	41	37
1917	277	24	65	94	63	55
1918	226	44	71	83	24	48
1919	196	30	58	76	16	46
1920	166	48	52	62	17	35
1921	164	55	52	65	17	30
1922	198	50	58	64	15	61
1923	188	38	57	44	21	66
1924	225	48	34	27	13	151
Total	2,274	370	588	774	330	582

The following tables are to be read in conjunction with the tables showing the amount of assistance given in other recent years. They indicate a continuance of distress:—

The number of cases of Tuberculosis in which the income of the individual or family showed varying amounts of deficit under an assumed standard of living, and the number in which assistance was given to the individual or the family, or both, is shown in the following tables:—

TABLE 10.

TABLE SHOWING PARTICULARS OF DISTRESS IN CASES OF TUBERCULOSIS NOTIFIED DURING THE YEAR 1924. CLASSIFIED ACCORDING TO THE REQUIREMENTS OF THE FAMILY IN EXCESS OF THE INCOME. FOOD, CALCULATED ON THE ATWATER SCALE; HOUSEHOLD SUNDRIES ON MR. ROWNTREE'S SCALE. TAKING THE UNITS OF FOOD AND HOUSEHOLD SUNDRIES USED IN 1913 AS STANDARDS, VARIOUS AMOUNTS HAVE BEEN USED. SINCE THE END OF 1922 THE AMOUNT ADDED HAS BEEN 90 PER CENT.

PULMONARY CASES.

Conditions affecting Individual Cases	Shortage up to—in Shillings.													
	—5/-	—10/-	—11/-	—12/-	—13/-	—14/-	—15/-	—16/-	—17/-	—18/-	—19/-	—20/-	—25/- +	Total
Living December 31st, 1924 ..	50	29	7	3	4	2	1	7	4	2	—	2	12	123
Dead December 31st, 1924 ..	23	19	2	4	1	2	1	1	1	—	2	—	8	64
Relief from Guardians	23	11	1	1	1	—	—	—	1	1	1	2	12	54
Assistance from the £2,750 Fund (Family)	28	19	6	3	3	2	—	5	3	2	—	—	6	77
Assistance from the £1,500 Fund (Individual)	19	11	—	3	1	1	—	1	1	—	—	—	1	38

TABLE 11.

NON-PULMONARY CASES.

Conditions affecting Individual Cases	Shortage up to—in Shillings													
	—5/-	—10/-	—11/-	—12/-	—13/-	—14/-	—15/-	—16/-	—17/-	—18/-	—19/-	—20/-	—25/- +	Total
Living December 31st, 1924 ..	16	12	—	1	—	—	1	4	—	1	—	—	5	40
Dead December 31st, 1924 ..	4	6	1	1	1	—	1	—	—	—	—	1	1	16
Relief from Guardians	7	4	—	—	—	—	1	—	—	1	—	1	4	18
Assistance from £2,750 Fund ..	11	11	—	—	—	—	1	1	—	—	—	—	—	24
Assistance from £1,500 Fund ..	6	2	—	—	—	—	—	—	—	—	—	—	—	8

With reference to Tables 10 and 11 it should be noted that Corporation assistance can only be given in cases which do not fall into the category of destitution.

TABLE 12.

SOURCES OF PRIMARY NOTIFICATION OF NON-PULMONARY CASES FOR THE YEARS 1918 TO 1924.

Source	1918	1919	1920	1921	1922	1923	192
Crumpsall Hospital	49	22	15	15	11	21	34
Withington Hospital	—	—	11	29	39	33	29
Booth Hall	45	33	43	60	35	38	47
Outside Poor Law	2	1	—	—	—	—	2
Royal Infirmary	111	58	95	95	69	125	99
Ancoats Hospital	57	34	31	27	45	76	76
Skin Hospital	35	32	46	66	37	48	41
St. Mary's Hospital	25	2	4	—	21	21	15
Northern Hospital	1	1	9	4	17	30	5
Jewish Hospital	1	19	11	1	1	1	5
Pendlebury Hospital	8	5	2	3	4	8	8
Hulme Dispensary	1	—	—	—	—	1	–
Gartside Street Dispensary.	66	19	25	63	36	71	41
Hardman Street Dispensary	15	9	23	23	33	21	11
Bowdon Hospital	—	—	2	—	—	3	1
Asylums	6	2	8	7	2	—	2
Schools	5	3	37	31	38	34	23
Tuberculosis Office Staff ..	6	16	16	7	13	20	19
Army	14	2	—	1	3	7	1
Various Sources	17	8	11	13	21	20	14
Private Practitioners	234	168	148	131	180	152	150
	698	434	537	576	605	730	623

TABLE 13.

NOTIFICATIONS OF PULMONARY AND NON-PULMONARY TUBERCULOSIS RECEIVED FROM SANITARY AREAS DURING 1924.

Statistical Divisions	Pulmonary	Non-Pulmonary	Totals
City of Manchester	1,509	623	2,132
I. Manchester Township	297	134	431
II. North Manchester	378	192	570
III. South Manchester	834	297	1,131
Ancoats	138	72	210
Central	42	14	56
St. George's	117	48	165
Cheetham	101	29	130
Crumpsall	24	5	29
Blackley	24	12	36
Harpurhey	47	22	69
Moston	18	15	33
Newton	61	44	105
Bradford	53	30	83
Beswick	22	18	40
Clayton	28	17	45
Ardwick	99	34	133
Openshaw	64	28	92
West Gorton	70	19	89
Rusholme & Kirkmanshulme	87	30	117
Chorlton-upon-Medlock	140	33	173
Hulme	148	66	214
Moss Side	59	25	84
Withington	76	20	96
Gorton	79	33	112
Levenshulme	12	9	21

TABLE A.

SUMMARY OF PRIMARY EXAMINATIONS MADE BY THE SENIOR TUBERCULOSIS OFFICER AND ASSISTANT TUBERCULOSIS OFFICER IN 1924.

	Reason for Examination				Occupational Condition at Examination		Diagnosis														Recommendations made						
							Pulmonary Tuberculosis			Tuberculosis of																	
	Treatment	Claimed Recovery	Diagnosis	Contacts	Working (or at School)	Not Working	Stage I.	Stage II.	Stage III.	Larynx	Bones and Joints	Glands	Abdomen	Other Organs	Doubtful Tuberculosis	Bronchitis	Heart Lesions	Other Diseases	No evidence of Tuberculosis	Recovery	No Disease	Delamere and Abergele	Baguley	Hardman Street Dispensary	Union	Other Hospitals	Private Practitioners	Observation
Males ..	243	27	235	50	216	339	70	70	102	13	16	25	3	26	113	92	6	44	116	28	60	70	123	9	10	47	111	97
Females	195	45	133	106	271	208	54	62	62	2	17	36	8	24	77	36	4	51	115	36	66	47	81	13	10	65	91	70
Children.	195	70	52	297	332	282	37	19	13	10	29	101	26	29	120	57	1	73	206	58	153	7	2	29	42	146	51	126
Totals ..	1,648				1,648		*1,965														1,648						

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* Total of "diseases" as distinct from total cases examined, *i.e.*, several patients had more than one form of disease present.

TABLE B.—RESULT OF EXAMINATION OF CASES SENT FOR DIAGNOSIS, 1924.

	Pulmonary Tuberculosis			Tuberculosis of					Doubtful Tuberculosis	No evidence of Tuberculosis	Bronchitis	Heart Lesions	Other Diseases
	Stage I.	Stage II.	Stage III.	Larynx	Bones and Joints	Glands	Abdomen	Other Organs					
Males	25	21	30	3	2	3	—	4	68	75	59	5	33
Females	18	22	16	1	—	4	3	1	41	25	17	2	31
Children	4	4	5	—	—	7	2	—	9	12	13	1	17

TABLE C.—RESULT OF EXAMINATION OF CONTACTS.

	Stage I.	Stage II.	Stage III.	Larynx	Bones and Joints	Glands	Abdomen	Other Organs	Doubtful Tuberculosis	No evidence of Tuberculosis	Bronchitis	Heart Lesions	Other Diseases
Males	2	1	1	—	—	—	—	—	10	34	13	—	3
Females	4	3	—	—	—	—	—	1	19	73	12	—	17
Children	8	1	—	—	2	11	2	—	84	169	33	—	44

TABLE D.—DISPENSARY RETURN, 1924.

Number of persons, including Contacts, who were examined for the first time during the period from January 1st to December 31st, 1924, at or in connection with the Dispensary or Visiting Station, and were					Number of persons diagnosed to be suffering from Tuberculosis who were treated or supervised at or in connection with the Dispensary or Visiting Station during the period from January 1st to December 31st, 1924		Number of persons who were under treatment, supervision, or observation at or in connection with the Dispensary or Visiting Station on December 31st, 1924	
Diagnosed as suffering from Tuberculosis	Diagnosed as *not* suffering from Tuberculosis	Undiagnosed and remaining under observation	Total number examined					
			Insured	Uninsured	Insured	Uninsured	Insured	Uninsured
1,258	2,418	478	797	3,357	102	955	46	485

TABLE E.—INSURED CASES TREATED IN 1924.

Residential	1,330
Dispensary	102
Domiciliary	2,339
Total	3,771

ANALYSIS OF CASES TREATED.

TABLE I.—*Residential* (*Insured*).

STITUTION	Total Cases Treated (1) Males	Total Cases Treated (1) Females	Discharged from Institutions Improved (2)	Discharged from Institutions Without Improvement (3)	Died (4)	*Residential Treatment discontinued in other cases (5)	Still under Residential Treatment on 1st Jan., 1925 (6)
			Pulmonary				
. .. .	543		198	110	87	4	144
		229	74	40	41	—	74
. .. .	145		106	9	1	6	23
		142	92	12	—	6	32
. .. .	106		62	7	—	1	36
		26	15	4	—	—	7
ulmonary	794	397	547	182	129	17	316
			Non-Pulmonary				
Royal Infirmary..	34		26	1	..	3	4
		28	24	1	1	1	1
al	3		3	—	—	—	—
		4	4	—	—	—	—
spital	6		3	3	—	—	—
		10	9	—	—	—	1
on-Pulmonary ..	43	42	69	5	1	4	6
LL FORMS	837	439	616	187	130	21	322

igures in column (5) relate to cases as to the progress of which no definite report is for various reasons—*e.g.*, the withdrawal from the Institution of the insured persons s before the expiration of the period for which they were nominated for the treatment.

tion to the above cases, 56 cases, mostly ex-service men, have been in the East Lancashire Colony, Barrowmore Hall, for treatment and for training.

TABLE II.—*Residential* (*Uninsured*).

INSTITUTION	Total Cases Treated (1)			Discharged from Institutions		Died	*Residential Treatment discontinued in other cases
	Males	Females	Children	Improved (2)	Without Improvement (3)	(4)	(5)
			Pulmonary				
Baguley	116			34	19	28	3
		128		45	21	18	1
			—	—	—	—	—
Crossley	34			18	2	—	2
		54		40	4	—	3
			—	—	—	—	—
Abergele	18			10	2	—	—
		8		5	—	—	—
			18	8	—	—	—
Total Pulmonary..	168	190	18	160	48	46	9
			Non-Pulmonary				
Manchester Royal Infirmary	5			3	1	—	—
		13		10	1	—	—
			19	15	2	—	—
Skin Hospital	1			—	—	—	—
		3		3	—	—	—
			12	7	—	—	—
Ancoats Hospital ..	—			—	—	—	—
		3		2	—	—	—
			36	34	1	—	—
Total Non-Pulmonary	6	19	67	74	5	—	—
TOTAL—ALL FORMS..	174	209	85	234	53	46	9

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* The figures in column (5) relate to cases of which no definite report is available fo reasons—*e.g.*, the withdrawal from the Institution of the persons themselves before the e of the period for which they were nominated for the treatment.

TABLE III.—*Dispensary* (*Insured*).

	Total cases treated (1)	Discharged from Institution		Died (4)	* Treatment discontinued in other cases (5)	Still under treatment on 1st January, 1925 (6)
		Improved (2)	Without Improvement (3)			
Ien..	70	19	18	3	—	30
Vomen	32	5	8	3	—	16
Totals.. ..	102	24	26	6	—	46

* See footnote to Table I.

TABLE IV.—*Dispensary* (*Uninsured*).

	Total cases treated (1)	Discharged from Institution		Died (4)	Still under treatment on 1st January, 1925 (5)
		Improved (2)	Without Improvement (3)		
Ien	104	27	41	—	36
Vomen	378	116	104	—	158
hildren (under 16) ..	473	118	64	—	291
Totals	955	261	209	—	485

Under the Corporation scheme patients suffering from surgical tuberculosis ave received treatment at the Manchester Royal Infirmary and Ancoats Iospital, and cases of tuberculosis of the skin have been treated at the Skin Iospital.

The types of case are summarised below.

Bones and Joints..	49
Glands	87
Genito-Urinary Tract	8
Abdomen	13
Lupus Vulgaris	210
Toxi-Tuberculids	3
Bazins Disease	6
Tuberculous Ulceration of Skin ..	21

Cases of skin tuberculosis attending at the Skin Hospital have had an lternative form of light treatment provided for them during the last three nonths. This consists in the establishment of artificial sunlight produced by arbon arc lamps. Arrangements have been entered into between the Corporation and the Skin Hospital for the treatment to be given in suitably elected cases, for Manchester patients treated on behalf of the Corporation.

TABLES SHOWING AFTER HISTORY OF ARRESTED CASES.

	No Tubercle Bacilli Found.					*Tubercle Bacilli Found.*				
Stage	Sex	Number of Cases taken off S.B.	Number known to be still living at end of 1924	Lost sight of	Died	Sex	Number of Cases taken off S.B.	Number known to be still living at end of 1924	Lost sight of	Died
1913.										
I.	M	1	1	—	—	M	—	—	—	—
	F	5	3	2	—	F	—	—	—	—
II.	M	2	—	1	1	M	1	1	—	—
	F	—	—	—	—	F	—	—	—	—
III.	M	—	—	—	—	M	—	—	—	—
	F	—	—	—	—	F	—	—	—	—
	M & F	8	4	3	1	M & F	1	1	—	—
1914.										
I.	M	14	6	4	4	M	4	3	1	—
	F	13	8	4	1	F	2	1	1	—
II.	M	3	2	1	—	M	3	2	—	1
	F	2	2	—	—	F	—	—	—	—
III.	M	2	—	1	1	M	1	—	1	—
	F	—	—	—	—	F	1	—	—	1
	M & F	34	18	10	6	M & F	11	6	3	2
1915.										
I.	M	20	10	7	3	M	14	6	—	8
	F	19	11	4	4	F	3	2	—	1
II.	M	16	9	4	3	M	2	1	—	1
	F	6	5	1	—	F	2	2	—	—
III.	M	1	1	—	—	M	4	3	—	1
	F	1	1	—	—	F	—	—	—	—
	M & F	63	37	16	10	M & F	25	14	—	11
1916.										
I.	M	16	10	3	3	M	10	6	—	4
	F	15	12	3	—	F	2	—	2	—
II.	M	4	3	—	1	M	6	2	2	2
	F	7	5	1	1	F	—	—	—	—
III.	M	1	1	—	—	M	1	—	--	1
	F	1	—	1	—	F	1	—	—	1
	M & F	44	31	8	5	M & F	20	8	4	8

TABLES SHOWING AFTER HISTORY OF ARRESTED CASES—continued

	No Tubercle Bacilli found.					*Tubercle Bacilli found.*				
Stage	Sex	Number of Cases taken off S.B.	Number known to be still living at end of 1924	Lost sight of	Died	Sex	Number of Cases taken off S.B.	Number known to be still living at end of 1924	Lost sight of	Died
					1917.					
I.	M	19	17	2	—	M	9	8	—	1
	F	11	7	3	1	F	3	1	—	2
II.	M	14	10	1	3	M	4	1	—	3
	F	7	6	1	—	F	1	—	1	—
II.	M	2	2	—	—	M	3	1	—	2
	F	—	—	—	—	F	—	—	—	—
	M & F	53	42	7	4	M & F	20	11	1	8
					1918.					
I.	M	18	10	5	3	M	6	4	1	1
	F	15	10	2	3	F	5	4	—	1
II.	M	13	9	2	2	M	7	5	—	2
	F	5	3	1	1	F	—	—	—	—
II.	M	3	3	—	—	M	1	1	—	—
	F	1	1	—	—	F	2	2	—	—
	M & F	55	36	10	9	M & F	21	16	1	4
					1919.					
I.	M	26	24	1	1	M	7	5	—	2
	F	10	7	3	—	F	3	3	—	—
II.	M	14	11	1	2	M	12	11	—	1
	F	11	8	2	1	F	10	9	—	1
II.	M	4	2	1	1	M	3	2	1	—
	F	1	1	—	—	F	1	—	—	1
	M & F	66	53	8	5	M & F	36	30	1	5
					1920.					
I.	M	22	17	1	4	M	14	11	1	2
	F	7	5	2	—	F	4	2	2	—
II.	M	20	16	1	3	M	7	5	—	2
	F	7	6	1	—	F	3	2	1	—
II.	M	2	2	—	—	M	2	2	—	—
	F	1	1	—	—	F	2	2	—	—
	M & F	59	47	5	7	M & F	32	24	4	4

TABLES SHOWING AFTER HISTORY OF ARRESTED CASES—continued

1921.

No Tubercle Bacilli found. . *Tubercle Bacilli found.*

Stage	Sex	Number of Cases taken off S.B.	Number known to be still living at end of 1924	Lost sight of	Died	Sex	Number of Cases taken off S.B.	Number known to be still living at end of 1924	Lost sight of	Died
I.	M	27	19	5	3	M	15	15	—	—
	F	19	16	3	—	F	3	3	—	—
II.	M	17	11	3	3	M	17	12	4	1
	F	7	6	1	—	F	3	2	1	—
III.	M	4	3	—	1	M	1	—	—	1
	F	3	3	—	—	F	—	—	—	—
	M & F	77	58	12	7	M & F	39	32	5	2

1922.

Stage	Sex	Number of Cases taken off S.B.	Number known to be still living at end of 1924	Lost sight of	Died	Sex	Number of Cases taken off S.B.	Number known to be still living at end of 1924	Lost sight of	Died
I.	M	38	33	3	2	M	13	12	1	—
	F	19	15	3	1	F	4	4	—	—
II.	M	18	16	1	1	M	22	17	3	2
	F	12	11	1	—	F	9	7	2	—
III.	M	9	9	—	—	M	3	3	—	—
	F	3	2	1	—	F	—	—	—	—
	M & F	99	86	9	4	M & F	51	43	6	2

1923.

Stage	Sex	Number of Cases taken off S.B.	Number known to be still living at end of 1924	Lost sight of	Died	Sex	Number of Cases taken off S.B.	Number known to be still living at end of 1924	Lost sight of	Died
I.	M	19	17	2	—	M	19	17	1	1
	F	17	16	1	—	F	2	2	—	—
II.	M	20	19	—	1	M	3	3	—	—
	F	5	4	1	—	F	5	5	—	—
III.	M	3	3	—	—	M	6	5	—	1
	F	1	1	—	—	F	1	1	—	—
	M & F	65	60	4	1	M & F	36	33	1	2

D. P. SUTHERLAND.

BAGULEY SANATORIUM.

REPORT FOR THE YEARS 1923 AND 1924.

The number of available beds was 333.

The number of patients admitted in 1923 was 784, and in 1924 770, the daily verage being respectively 317 and 312.

The table below gives the number of patients in hospital on the last day of ach month in the years 1921, 1922, 1923, 1924.

	1921	1922	1923	1924
anuary	310	311	304	319
February	311	309	310	314
March	310	311	311	317
April	314	313	311	*310
May	308	310	322	*317
June	313	319	326	*319
July	302	320	324	*317
August	305	318	331	*309
September	307	304	324	*310
October	314	324	326	*310
November	301	314	323	*309
December	291	298	300	*296

* The number of available beds was 327 owing to the relaying of the floor in one of the wards.

On December 31st, 1923, there were 60 patients, and on December 31st, 1924, there were 52 patients who had been in the institution for a longer period than one year.

	1923	1924
Patients in hospital for 1–2 years	28	30
,, ,, 2–3 ,, ...	12	9
,, ,, 3–4 ,, ...	7	3
,, ,, 4–5 ,, ...	4	1
,, ,, over 5 ,, ...	9	9

	1923	1924
Number of patients in hospital, January 1st ..	298	300
,, ,, admitted during the year..	784	770
,, ,, discharged ,, ,, ..	562	598
,, ,, dead ,, ,, ..	220	176
Total number of patients treated	1,082	1,070
Patients remaining in hospital, December 31st	300	296

From April to December, 1924, the number of beds available for females was increased by 30, with a corresponding decrease for males.

Bucklow cases.

On January 1st, 1923, there were 7 patients from the Bucklow Rural District Council, 19 patients were admitted during the period, 16 patients discharged, and 7 died ; 3 patients remained in the hospital on December 31st, 1924.

The average length of stay of patients discharged during the period :—

Males	111·7 days.
Females	122·1 ,,

Number of specimens of sputum examined :—

	1923	1924
Ziel-Nielson Method.—		
Number of examinations ..	2,050	2,401
Positive	1,072	1,063
Negative	978	1,338
Antiformin Method.—		
Number of examinations ..	330	530
Positive	59	106
Negative	271	424

Other examinations.—	1923	1924
Gastric contents	2	0
Special examination of urine ..	27	56
Pleural effusion	6	4
Peritoneal fluid	1	0
Blood	4	1
Pus	21	6
Uretheal discharge	1	0

	1923	1924
Number of Autopsies	63	50

The number of sputa examined is higher than in previous years. The Albumin reaction has been dispensed with.

A large number of Wassermann's reactions were carried out at the Public Health Laboratory.

Dental Report.	1923	1924
Patients seen	100	490
Fillings	9	42
Extractions	110	376
Dentures	8	10
Repairs to dentures	4	5
Scaling	4	6

The figures for 1923 only represent nine months work, as the Sanatorium was without a dental surgeon from August to November.

The work for 1924 shows a large increase, and in addition, the dentist holds periodic mouth inspections on each ward. The benefit of oral hygiene to even advanced cases has been exemplified on many occasions.

1923.

Females—Ages 15–24.

The number of patients discharged during the year was 43.

Classification on Discharge.

Turban Gerhardt	International						
	1	2	3	4	5	6	
1	..	..	2	..	..	..	Improved ..27
2	..	..	2	3	..	..	Stationary .. 8
3	..	..	..	3	23	8	Worse 6

Two patients suffered from non-tuberculous disease.

Twenty-four patients were admitted with a positive sputum of whom three were negative on discharge.

1923.

Females—Ages 25–34.

The number of patients discharged during the year was 59.

CLASSIFICATION ON DISCHARGE.

Turban Gerhardt	International						
	1	2	3	4	5	6	
1	..	..	2	..	..	..	Improved ..34
2	..	..	1	11	1	..	Stationary ..12
3	..	..	..	7	23	8	Worse 7

One patient left before diagnosis was complete.

Two had no evidence of active tuberculosis.

One had tuberculous peritonitis, no lung lesion.

Two suffered from non-tuberculous disease.

Thirty patients were admitted with a positive sputum, of whom two were negative on discharge.

Females—Ages 35–44.

The number of patients discharged during the year was 47.

CLASSIFICATION ON DISCHARGE.

Turban Gerhardt	International						
	1	2	3	4	5	6	
1	..	1	..	..	..	..	Improved ..33
2	..	..	..	7	14	..	Stationary .. 4
3	..	..	..	7	17	4	Worse 3

Six patients had no pulmonary lesion.

One left before diagnosis was complete.

Twenty-four patients were admitted with a positive sputum, of whom three were negative on discharge.

1923.

males—Ages 45 *and over.*

The number of patients discharged during the year was 16.

CLASSIFICATION ON DISCHARGE.

Gerhardt	International						
	1	2	3	4	5	6	
1	2	..	..	..	..	..	Improved ..10
2	..	..	..	1	2	..	Stationary .. 5
3	..	..	..	2	8	..	Worse 0

One patient had no active pulmonary tuberculosis.

Six patients were admitted with a positive sputum of whom three were gative on discharge.

ales—Ages 15–24.

The number of patients discharged during the year was 76.

CLASSIFICATION ON DISCHARGE.

Turban Gerhardt	International						
	1	2	3	4	5	6	
1	..	..	..	..	..	..	Improved ..49
2	..	1	1	9	..	..	Stationary ..10
3	..	..	..	22	27	12	Worse 15

Two patients showed no signs of pulmonary tuberculosis.

Thirty-seven patients were admitted with a positive sputum of whom five vere negative on discharge.

1923.

Males—Ages 25–34.

The number of patients discharged during the year was 85.

CLASSIFICATION ON DISCHARGE.

Turban Gerhardt	International						
	1	2	3	4	5	6	
1	..	1	..	..	..	..	Improved ..5
2	..	1	4	2	1	..	Stationary ..2
3	..	7	..	15	47	10	Worse .. ..

Two patients showed no signs of pulmonary tuberculosis.

One absconded before diagnosis was complete.

Forty-two patients were admitted with a positive sputum, of whom eigh were negative on discharge.

Males—Ages 35–44.

The number of patients discharged was 104.

CLASSIFICATION ON DISCHARGE.

Turban Gerhardt	International						
	1	2	3	4	5	6	
1	1	2	..	..	..	..	Improved ..7
2	..	..	5	7	2	..	Stationary ..2
3	..	1	..	19	57	10	Worse 1

Seventy-five patients were admitted with a positive sputum, of whom te were negative on discharge.

1923.

ales—Ages over 45.

The number of patients discharged was 132.

CLASSIFICATION ON DISCHARGE.

Gerhardt	International						
	1	2	3	4	5	6	
1	..	2	1	1	..	..	Improved ..88
2	..	..	2	6	1	..	Stationary ..34
3	..	..	..	24	83	12	Worse 8

One patient showed no signs of active tuberculosis.

One absconded before diagnosis was complete.

Sixty-seven patients were admitted with a positive sputum, of whom eight ere negative on discharge.

1924.

emales—Ages 15–24.

The number of patients discharged during the year was 60.

CLASSIFICATION ON DISCHARGE.

Gerhardt	International						
	1	2	3	4	5	6	
1	..	2	..	..	..	..	Improved ..29
2	..	..	2	9	1	..	Stationary ..11
3	..	..	..	9	13	16	Worse 12

Seven patients showed no signs of active tuberculosis.

One case was arrested.

Thirty-three patients were admitted with a positive sputum, of whom one as negative on discharge.

Females—Ages 25–34.

The number of patients discharged was 62.

CLASSIFICATION ON DISCHARGE.

Turban Gerhardt	International						
	1	2	3	4	5	6	
1	..	2	..	..	..	..	Improved ..3
2	..	1	3	10	..	..	Stationary ..1
3	..	..	..	9	25	6	Worse .. ..

One case was arrested.

Four patients showed no evidence of active tuberculosis.

One patient left before diagnosis was complete.

Thirty-six patients were admitted with a positive sputum, of whom tw were negative on discharge.

Females—Ages 35–44.

The number of discharges was 47.

CLASSIFICATION ON DISCHARGE.

Turban Gerhardt	International						
	1	2	3	4	5	6	
1	..	2	..	..	..	..	Improved ..3
2	..	..	2	7	..	..	Stationary ..
3	..	..	..	6	19	8	Worse .. ..

Three patients showed no signs of active tuberculosis.

Thirty-six patients were admitted with a positive sputum, of whom two were negative on discharge.

1924.

males—Ages 45 *and over.*

The number of discharged during the year was 28.

CLASSIFICATION ON DISCHARGE.

Gerhardt	International						
	1	2	3	4	5	6	
1	..	1	..	3	2	..	Improved ..19
2	..	..	1	5	..	..	Stationary .. 8
3	..	..	..	3	12	1	Worse .. 1

Of twelve patients admitted with a positive sputum four were negative on scharge.

ales—Ages 15–24.

The number of patients discharged during the year was 93.

CLASSIFICATION ON DISCHARGE.

Gerhardt	International						
	1	2	3	4	5	6	
1	..	1	..	..	..	..	Improved ..52
2	..	..	9	17	2	..	Stationary ..22
3	..	..	..	18	30	9	Worse 12

Three patients showed no signs of active pulmonary tuberculosis.

Four patients left before diagnosis was complete.

Thirty-eight patients were admitted with a positive sputum, three were egative on discharge.

1924.

Males—Ages 25–34.

The number of patients discharged during the year was 77.

CLASSIFICATION ON DISCHARGE.

Turban Gerhardt	International						
	1	2	3	4	5	6	
1	..	..	..	1	..	..	Improved ..5
2	..	..	4	11	1	..	Stationary ..1
3	..	..	..	26	27	4	Worse .. ..

One patient showed no signs of active pulmonary tuberculosis.

Two patients left before diagnosis was complete.

Thirty patients were admitted with a positive sputum, three were negativ on discharge.

Males—Ages 35–44.

The number of patients discharged during the year was 114.

CLASSIFICATION ON DISCHARGE.

Turban Gerhardt	International						
	1	2	3	4	5	6	
1	..	..	1	..	..	..	Improved ..68
2	..	..	4	11	2	..	Stationary ..32
3	..	..	..	35	54	4	Worse 11

Two patients showed no evidence of pulmonary tuberculosis.

One patient left before diagnosis was complete.

Sixty-one patients were admitted with a positive sputum, of whom twelve were negative on discharge.

1924.

les—Ages 45 *and over.*

The number of patients discharged during the year was 117.

CLASSIFICATION ON DISCHARGE.

	International						
	1	2	3	4	5	6	
1	..	..	2	1	..	..	Improved ..73
2	..	..	5	8	..	..	Stationary ..35
3	..	..	..	35	54	7	Worse 7

Three patients showed no evidence of active pulmonary tuberculosis.

Two left before diagnosis was complete.

Forty-five patients were admitted with a positive sputum, of whom eight re negative on discharge.

mplications in female cases discharged in 1923 *and* 1924.

	1923	1924
Tuberculous larynx	8	10
,, peritonitis	4	—
,, enteritis	1	2
,, salpingitis	1	—
,, tongue	—	1
Spinal caries	2	1
Renal tuberculosis	1	—
Gastric ulcer	1	—
Mitral disease	2	—
Rheumatoid arthritis	—	2
Carcinoma (breast)	1	—
Exopthalmic goitre	2	—
Diabetes	1	—
Syphilis	1	—
Epilepsey	1	—
Chronic mastoiditis	—	2
Disseminated sclerosis	—	1
Cystitis	—	1
Fistula in ano	—	1
Adenitis	—	1
Empyema—Antrum of Highmore	—	1
Totals	26	23

Complications in Male cases discharged in 1923 *and* 1924.

	1923	1924
Tuberculosis of the larynx	25	24
„ „ spine	2	3
„ of bone (other than spine)	8	4
Tuberculous adenitis	7	4
„ enteritis	1	2
„ epididymitis	1	—
Pyo-pneumothorax	1	—
Ischio-rectal abscess	1	—
Bronchiectasis	1	—
Mitral disease	4	—
Lupus	3	—
Otitis media	2	1
Gastritis	—	1
Asthma	1	—
Hernia Inguinal	4	2
Facial paralysis	1	—
Gonorrhœa	1	—
Appendicitis	—	1
Fistula in ano	—	1
Valvular disease of the heart	—	7
Mania	—	1
Senile dementia	—	1
Goitre	—	3
Mediastinal Neoplasm	—	1
Malaria	—	2
Eczema	—	1
Syphilis	—	1
Locomotor ataxia	—	1
Silicosis	—	1
Totals	63	59

Complications occurring amongst fatal cases in 1924.

Complication	Male	Female
Hæmoptysis	7	2
Tuberculous laryngitis	21	12
,, adenitis	5	3
,, meningitis	2	—
,, enteritis	11	9
,, pericarditis	1	—
,, kidney	1	—
,, bladder	1	—
,, bone	4	3
,, spine	1	—
,, peritonitis	2	—
Pyo-pneumothorax	2	2
Mitral incompetence	3	1
Gangrene of lung	2	—
Diabetes mellites	2	1
Nephritis	2	—
Adherent pericarditis	1	—
Cerebral	1	—
Epithelioma of lung	—	2
Carcinoma of œsophagus	1	—
Malaria	1	—
Syphilis	1	—
Total	72	35
Uncomplicated cases	45	24

Of the fatal cases in 1924, seven cases had been in the hospital under one week, and ten under two weeks.

The number of deaths in 1923 was 220, made up of 154 males and 66 females ; this represents a mortality of 20·3 per cent.

23 fatal cases were in the hospital for one week or less.

28 fatal cases were in the hospital over one week but less than three.

The number of deaths for the year 1924 was 176, made up of 117 males and 59 females, making a case fatality of 16·5.

Complications occurring amongst fatal cases in 1923.

Complication	Male	Female
Hæmoptysis	4	2
Tuberculous laryngitis	26	4
,, adenitis	2	—
,, meningitis	2	—
,, enteritis	4	2
,, pericarditis	1	—
,, kidney	—	—
,, bone	1	1
,, tongue	1	—
,, spine	1	—
Pyo-pneumothorax	3	—
Goitre	2	1
Mitral stenosis	2	—
Nephritis	2	2
Subphrenic abscess	1	—
Cerebral	1	—
Carcinoma œsophagus	1	—
Carcinoma stomach	1	—
Mediastinal tumour	1	—
Carcinoma rectum	1	—
Diabetes	2	—
Endocarditis	1	1
Total	60	13
Uncomplicated cases	94	53

7 fatal cases were under one week in the hospital.

26 fatal cases were over one week in the hospital but less than three.

Patients.

Lectures have been given to both male and female patients. It is proposed to introduce an improved system of rest and exercise as soon as possible.

A further development of the workshops is contemplated.

Occupational Treatment.

The workshops still maintain their position as the most important unit in this form of treatment. The need of a cabinet maker or carpenter on the staff was exemplified during this period by the difficulty of obtaining an instructor.

The need of a hostel outside the sanatorium confines for housing the structors will have to be considered in the near future.

Graduated work in the grounds, gardens, and greenhouses, is carried out by ale and female patients, though the patients attaining to the highest grade not high.

aily average of male patients on "Grades."

Grade 1	Grade 2	Grade 3	Grade 4	Grade 5	Totals
18	13	24	16	2	73

An endeavour was made in 1923 to embody handicrafts in the scheme of graded work" ; rug making, hand weaving, machine knitting, Indian sketry, embroidery, etc., but the intention of disposing of the articles for the nefit of the sanatorium did not appeal to the average patient. The trial ade in 1924 to have various handicrafts taught, and for the patients to have me financial reward when the articles were sold has only met with partial ccess, and was a very poor return for the interest and keenness that the structress, Miss Oppenheimer, took in the work.

The matron and the assistant-matron gave much time and assistance, and take this opportunity of expressing my thanks for and appreciation of their orts.

ecial methods of treatment.

Artificial pneumothorax is much handicapped by the delay in the erection the X-ray installation.

lcium salts.

A more extensive trial of the colloidal salts has proved that they are of nefit in certain cases.

iberculin-antigen-Scheitlin after a thorough trial has been discarded as of tle value.

utogenous vaccines for secondary infections, particularly of large cavities, ve been used with good results.

iagsolysine. This preparation was tried and found of some value, but required eat care in its administration as several severe reactions were observed. It is very expensive method of treatment, and the results do not justify its wide plication.

Krysolgan was used in three cases of tuberculous ulcers of the tongue a appeared to be of some value. Caution is most necessary if severe reacti in the pulmonary lesion are to be avoided.

Diaplyte Vaccine. Sixty cases of pulmonary tuberculosis were treated w this vaccine.

The cases were doubly classified according to the Turban Gerhardt and t International method.

Turban Gerhardt	International						
	1	2	3	4	5	6	
1	1	..	..	..	..	..	One case pleu only
2	..	..	..	6	..	..	
3	..	..	..	6	30	16	

In fifty-eight of these cases tubercle bacilli had been found. The conditi at the beginning of treatment, after four months and after eight months, w as follows :—

	Commencement of Treatment	Four months	Eight months
Aferbrile.			
Improving	5	24	23
Stationary	15	3	3
Not improving	13	7	7
Febrile.			
Improving	1	—	—
Not improving	26	17	8
Died	—	9	19

The condition shown in percentages at four months and at eight months :—

Improving	40 per cent.	38·33 per cent.
In statu quo	25 ,,	18·33 ,,
Worse	20 ,,	11·66 ,,
Died	15 ,,	31·66 ,,

Dosage was in accordance with the recommendations of Professor Dreyer d Dr. Douglas.

In pulmonary tuberculosis this form of treatment must be used with great ution. The number of cases treated is small, and the results to-date do not ow any marked superiority over other forms of treatment. In febrile cases e results were disappointing, but in aferbrile stationary cases it appears to of some value.

ff.

On completion of the extensions it is hoped that an increase of the nursing ff will be possible.

tensions and Improvements.

The additional accommodation provided for the domestic staff should be ailable in the summer of 1925.

The enlarging of the kitchen is slowly progressing and should be in use about e same time.

The X-ray apparatus has not yet been installed owing to the delay in finishing e room.

The laying of the macadam roads in the sanatorium grounds is now complete, d in time it is hoped that all the paths will be similarly constructed.

The new shale tennis court is much appreciated by the nursing staff.

The treatment of the sewage effluent by chlorine is still carried out, but it hoped that some less costly system will be installed at no far distant date.

The provision of a chapel is an improvement long over due, especially as the esent accommodation is urgently required for other purposes.

tertainments.

On behalf of the patients and the staff I wish to express our grateful thanks Messrs. Gaumont Limited for the weekly supply of films during the winter onths. Our thanks are also due to The Famous Lasky Company Limited 10 provided several pictures, and who have promised help for the future. ne provision of a new cinematograph machine is much appreciated by all.

The weekly concerts were received with their usual enthusiasm, and w tender our thanks to the many amateurs and professionals who so kindly gav their services. The Patients' Concert and Dramatic Party gave sever excellent entertainments during the period.

The whist drives were held weekly, and as prizes are frequently given by th canteen fund, this form of entertainment is increasing in popularity.

In the summer months the bowling team played several matches and wer very successful. The band afternoons are much appreciated by all.

If this important side of sanatorium life is supported in the future as it ha been in the past, it is hoped that it will be possible to provide, in the winte entertainments on at least three evenings in the week. The value of collectiv recreational facilities in the evenings is of more importance than the recreationa facilities offered by the Day Rooms, valuable though the latter be as socia centres in the day time during the winter months.

In conclusion, I wish to express my thanks to the staff for the loyal and willin manner in which their duties have been carried out.

H. G. TRAYER.

The tables attached show the results of the examination of patients teste with tuberculin in 1919, 1920, 1921, 1922, and 1923. In each case the after history column has been very kindly completed by the Senior Tuberculosi Officer.

Tested 1919	Condition, February 1924
No reaction to tuberculin 10	No evidence of active tubercule .. 6 Probably not active tuberculosis .. 1 Not traced 3
Doubtful reaction 1	Dead 1
Very doubtful reaction 1	Probably non-tubercular silicosis .. 1
Positive reaction 3	Quiescent .. .. 1 With signs not active .. .. .. 1 Dead 1

TABLE I.—SHOWING THE APPLICATION OF TUBERCULIN TO THE DIAGNOSIS OF DOUBTFUL CASES IN 1919.

NOS.	PHYSICAL SIGNS	TUBERCULIN	SPUTUM	REACTION	DIAGNOSIS	AFTER HISTORY, 1924
1. Age 26	Impaired percussion note right apex. Faint inspiratory crepitations	·001 ·005 ·005 ·01 ·01 June, 1919	None	Negative	Nasal obstruction. No evidence of active tubercle	1. No definite signs.
2. Age 24	Impaired percussion note right apex. Prolonged expiratory murmur	·001 ·005 ·01 Nov., Dec., 1919	None	Negative	No evidence of active tubercle	2. No definite signs.
3. Age 19	Impaired percussion note right apex.	·001 ·005 ·01 ·01 Sept., 1919	None	Negative	No evidence of active tubercle	3. No definite signs.
4. Age 18	Impaired percussion note over both apices. Prolonged expiratory murmur over right upper lobe	·001 ·005 Nov., 1919	None	Negative	No evidence of active tubercle	4. No definite signs.
5. Age 39	Impaired percussion note over right apex. Breath sounds weak in right upper lobe. Defective basal expansion, mitral stenosis	·001 Nov., 1919	Sputum suspicious	Temperature never higher than 98·4, but irregular	?	5. Very little activity of disease, but slight progressive loss of weight.
6. Age 32	Slight impairment of percussion note at the left base. Prolonged expiration left base	·001 ·005 ·005 June, 1919	Negative	General reaction focal pleuritic rub, right base	Tuberculous pleurisy right base ? L	6. Disease quiescent.
7. Age 25	Scar and small sinus from G.S.W. chest below angle of left scapula. Percussion note impaired over left upper lobe. Fine inspiratory creps over both apices behind. Moist râles at angle of left scapula	·001 ·003 ·005 May, 1919	? + 31-5-19	Nil.	Doubtful	7. Lost sight of.
8. Age 39	Physical signs of bronchitis and emphysema	·001 18–8–19	Negative on three occasions until 12-11-20, 86 days after reaction	General reaction, local reaction, focal reaction in left lower lobe at the angle of scapula	Bronchitis and emphysema T.B. focus in left lower lobe	8. Died in Baguley 27th February, 1920.
9. Age 26	Bronchitis, both bases	·001 July, 1919	Negative on six occasions	Nil.	Chronic bronchitis, Nasal obstruction. Laryngitis	9. Tuberculosis quiescent. Slight bronchitis.
10. Age 34	Broncho-vesicular breathing below angle of right scapula. Defective expansion at both apices	·001 ·003 ·005 June, July, 1919	Negative	Focal pleuritic rub. rt. base. Increase in sputum No general reaction	Positive	10. Very little activity. Slight loss of weight.
11. Age 26	Impaired percussion note right apex. Diminished basal expansion right. Doubtful creps at extreme apex of right lung	·001 ·005 Sept., 1919	Negative	None	Post nasal catarrh	11. Lost sight of.
12. Age 32	Slight impairment of percussion note right apex. Doubtful occasional crepitations extreme apex	·001 ·005 ·01 Nov., Dec., 1919	Negative	None	Not T.	12. No signs of activity.
13. Age 34	Slight impairment of percussion note both apices. Some congestive crepitations at both bases	·001 ·005 ·01 May, 1919	None	None	Not T.	13. Lost sight of.
14. Age 40	Fibrosis right upper lobe. Impaired percussion note. Tubular breathing occasional fine râles	·001 Nov., 1919	None	Local reaction, slight pain in right side. No general reaction	Probable silicosis right lung. Left hospital prematurely	14. No evidence of active disease.
15.	Bronchitis, emphysema, alcoholic gastritis	·001 Dec., 1919	Negative	Doubtful reaction. Temperature rose 6°. No local or focal	Left prematurely before diagnosis complete	15. Died January, 1922, of active lesion.

TABLE II.—SHOWING THE APPLICATION OF TUBERCULIN TO THE DIAGNOSIS OF DOUBTFUL CASES IN 1920.

NOS.	PHYSICAL SIGNS	TUBERCULIN	SPUTUM	REACTION	DIAGNOSIS	AFTER HISTORY, 1924
1. Age 39	Impaired note left apex. Faint inspiratory crepitations, rather transient in type	·0001 ·0005 ·001 Jan., 1920	Negative	None	Not active	1. No evidence of active disease.
2. Age 26	Impaired percussion note. Transient crepitations right apex	·001 ·005 ·01 Feb., 1920	Negative	None	No evidence of active tuberculosis	2. T.B. positive. Died in Baguley 2nd November, 1922.
3. Age 33	Impaired note left apex. Occasional scattered rhonchi generally. Post tussive creps left base. Infection of left vocal cord	·001 ·005 ·01 March, 1920	Negative	Creps appearing after ·01 cc. O.T. in left lower lobe. No general reaction	Doubtful	3. Has left Manchester. Stated to be on waiting list for Sanatorium.
4. Age 44	Patient obese. Impaired percussion note left apex. Signs of general bronchitis. Enlarged turbinate. Right nostril, nasal obstruction	·001 ·005 ·01 June, 1920	Negative	None	Bronchitis and emphysema No evidence of active tubercle	4. No evidence of active disease.
5. Age 38	Impaired percussion note right base, below scapular angle. Fine inspiratory crepitations. *X Ray.*—Fine consolidation spreading from roots of both lungs, especially right. Probably not active	·001 ·005 ·01 June, 1920	Negative	None	Not active tubercle	5. Died 23rd December, 1920, from chronic bronchitis and cardiac failure.
6. Age 27	Tremors. Pulsation of arteries. Slight enlargement of thyroid. Impairment of percussion note right upper lobe and right root. Inspiratory phase rather harsh	·001 ·005 ·01 Nov., 1920	Negative	Temperature: 100 after ·001. No focal or local reaction. No reaction after ·005 cc.	Hyperthyroidism. No evidence of active tubercle	6. No signs of active disease.
7. Age 28	Percussion note right apex. Occasional post tussive râles right apex. Generalised bronchitis	·001 ·005 July, 1920	Negative	None	Doubtful	7. No evidence of active disease.
8. Age 40	Emphysema. Transient creps. Right apex. Nasal obstruction. Enlarged turbinates	·002 ·005 ·015 Aug., 1920	Negative	None	Not active tuberculosis	8. No evidence of active disease.
9. Age 38	Impairment of percussion note, right upper lobe. Expiratory phase prolonged. *X Ray.*—Root shadow right side. Considered suspicious only	·001 ·002 ·002 Sept., 1920	None	None, except local reaction after second and third doses	Not active tuberculosis	9. Lost sight of.
10. Age 38	Scattered catarrhal signs in both lungs. Some diminution in expansion, right base. Rhinitis, pharyngitis. Both vocal cords infected in posterior two-thirds of their length	·001 ·005 ·01 Nov., 1920	Negative	None	No evidence of active tuberculosis	10. No active signs.
11. Age 29	Impairment of percussion note, right apex. Fine râles in both lungs. Deviated nasal septum. Blood pressure 170. Accentuated aortic, 2nd sound	·001 ·005 ·01 Nov., 1920	Negative	None, except headache after second and third doses	No evidence of active tuberculosis	11. No signs of active disease.
12. Age 36	Bronchitis and emphysema. Dilated stomach	Nil	None	None	Pyloric obstruction. Dilated stomach	12. Lost sight of.
13. Age 27	Generalised dry rhonchi throughout both lungs. Percussion note impaired left apex, behind	·001 ·005 ·01 1920	Negative	None	No evidence of active tuberculosis	13. No evidence of active disease.

Table III.—Showing the Application of Tuberculin to the Diagnosis of Doubtful Cases in 1921.

Nos.	Physical Signs	Tuberculin	Sputum	Reaction	Diagnosis	After History, February, 1924
1. Age 25	Slightly impaired note right apex in front. Deficient expansion of both bases. Scattered rhonchi throughout both lungs. Congested naso pharynx	·001 ·005 } Jan., 1921	Negative	None	Bronchitis	1. No evidence of tuberculosis.
2. Age 43	Impaired percussion note right apex. Rhonchi throughout both lungs. Emphysema	·001 ·005 ·01 } March, 1921	Negative	Temperature: 100, and slight local reaction after ·01. No focal or general reaction	Bronchitis. Not active tubercle	2. No evidence of tuberculosis.
3. Age 58	Impaired percussion note to second rib. In front and fifth dorsal vertebra behind, with blowing breath sounds, emphysema	·001 ·005 ·01 } Jan., 1921	Negative for T.B. Positive for albumin	No reaction	Diagnosis not complete	3. Died 4th May, 1921. "Cerebral hæmorrhage."
4. Age 38	Impaired percussion note over right side. Scattered rhonchi throughout right side. Râles both bases. Emphysema	·001 ·005 ·01 } July, 1921	Negative	Local reaction to ·01, with temperature of 99·2	Quiescent tuberculosis. Pleurisy, bronchitis, emphysema	4. Lost sight of.
5. Age 28	Slightly impaired percussion note over right lung. Poor respiratory murmur. Nasal obstruction	·001 ·005 ·01 } Nov., 1921	Negative	Local reaction to ·01	Probably quiescent tuberculosis, pleurisy	5. No evidence of tuberculosis.
6. Age 27	Impaired percussion note over left apex	·001 ·005 ·01 } Sept., 1921	Negative	Temperature: 99 after ·01, ·001, ·005. No focal reaction	No evidence of active tubercle	6. Lost sight of.
7. Age 36	Impaired percussion note left apex in front and left lower apex behind with harsh inspiration *X Ray.*—Enlargement of bronchial glands both roots	·001 ·005 ·01 ·01 }	Negative for T.B. Positive for albumin	Moderate local reaction and headache after the second ·01. No focal reaction	Not pulmonary tuberculosis	7. Lost sight of.

TABLE IV.—SHOWING THE APPLICATION OF TUBERCULIN TO THE DIAGNOSIS OF DOUBTFUL CASES IN 1922.

NOS.	PHYSICAL SIGNS	TUBERCULIN	SPUTUM	REACTION	DIAGNOSIS	AFTER HISTORY, FEBRUARY, 1924
1. Age 42	Greatly diminished expansion of left lung. Bronchitis. *X Ray.*—Indicates chronic bronchitis	·001 ·005 ·01 May, 1922	Negative	None	Chronic bronchitis	1. Still has bronchitis. No evidence of tuberculosis.
2. Age 41	Bronchitis and emphysema	·0002 ·001 ·005 ·01 March, 1922	Negative	None	Bronchitis No evidence of active tuberculosis	2. Died 29th March, 1923. Chronic bronchitis and heart failure.
3. Age 51	Bronchitis and emphysema	·0002 ·001 ·005 ·01 March, 1922	Negative for T.B. Positive for albumin	None	Bronchitis. No evidence of active tuberculosis	3. Died 5th January, 1923. Certified acute pulmonary tuberculosis.
4. Age 16	Mediastinal new growth, pressing the heart to the left. Heart dilated, especially left side *X Ray.*—Reports showed slow growth over a period of four months	·0002 ·001 ·005 ·01 August, 1922	Negative for T.B. Positive for albumin	General reaction after ·005cc, slight local, no focal	Mediastinal neoplasm	4. No definite signs of active tuberculosis.
5. Age 53	Bronchitis *X Ray.*—Fibrosis on both sides. Calcified foci at the roots and one in right lower lobe	·001 ·005 ·01 Sept., 1922	Negative	None	Bronchitis. No evidence of active tuberculosis	5. Sputum positive for tuberculosis.
6. Age 47	Impaired note right apex in front; left apex behind. Bronchitis	·001 ·005 ·01 May, 1922	Negative to T.B. and albumin	None	Bronchitis No evidence of active tuberculosis	6. Died 24th April, 1923. Chronic bronchitis.
7. Age 67	Poor percussion note over left apex. Bronchitis both bases. Mitral stenosis. B.P. 120	·0002 ·001 ·005 ·01 August, 1922	Negative to T.B. Positive albumin	None	Bronchitis	7. Died 19th September, 1922. ? Heart failure.
8. Age 21	Impaired percussion note over left apex in front and behind. Harsh breath sounds over left front and base *X Ray.*—Heavy fibrosis both roots. Few calcified foci	·0002 ·001 ·005 ·01 Sept., 1922	None	None	No evidence of active tubercle	8. Address unknown. Left district.
9. Age 41	Respiratory murmur weak over left apex. Larynx congested	·0002 ·001 ·005 ·01 March, 1922	None	None	Chronic laryngitis	9. Left district. Cannot trace.
10. Age 20	Impaired percussion note left apex front and back. Few creps. *X Ray.*—No evidence of any tuberculosis	·075 July, 1922	None	Doubtful focal reaction	No evidence of active tubercle	10. No evidence of tuberculosis.
11. Age	Dullness over right apex behind with prolongation of expiration *X Ray.*—Few calcified glands both roots. Apices clear. B.P. 140	·001 ·01 March, 1922	Negative for T.B. Positive albumin	None	No evidence of active tubercle	11. No evidence of tuberculosis.
12. Age 31	Slightly impaired percussion note both apices in front. Transcient creps right apex	·001 ·005 June, 1922	None	After ·001 doubtful focal reaction. Faint creps right apex end of inspiration	Absconded before diagnosis was complete	12. Bedfast and under medical attention.
13. Age 57	Few creps at right apex at inspiration persistent. Harsh respiratory murmur left apex. Bronchitis	·001 April, 1922	Negative	None	Bronchitis No evidence of active tubercle	13. Patient has left district. Cannot trace.

TABLE V.—SHOWING THE APPLICATION OF TUBERCULIN TO THE DIAGNOSIS OF DOUBTFUL CASES IN 1923.

NOS.	PHYSICAL SIGNS	TUBERCULIN	REACTION	SPUTUM	DIAGNOSIS	PRESENT CONDITION, FEBRUARY, 1924
1. Age 27	Slightly impaired note left apex behind. Breath sounds very weak both sides. Hysterical dyspneoa.	·002 ·001 ·005 ·01 January, 1923	None	Negative	Hysteria	No evidence of active disease.
2. Age 27	Impaired note right apex in front. Expiration harsh and prolonged over same area	·001 ·005 ·01 ·03 March, 1923	Local and General reaction after ·03 T 101·4	None	Not active tuberculosis	Very little activity, but slight loss of weight.
3. Age 37	Impaired note left base and apex. *X Ray.*—Showed enlarged bronchial glands and increased root shadows	·001 ·005 ·01 April, 1923	None	Negative	No active tuberculosis	No evidence of active disease.

Tested 1920		Condition February, 1924	
No reaction to tuberculin	11	No evidence of active tuberculosis Dead Not traced	7 2 2
Doubtful reaction	1	Not active tuberculosis	1
Positive reaction	1	Left the district	1

Tested 1921		Condition February, 1924	
No reaction to tuberculin	5	No evidence of active tuberculosis Probably not active tuberculosis Not traced Dead	2 1 1 1
Doubtful reaction	2	No active tuberculosis Not traced	1 1

Tested 1922		Condition February, 1924	
No reaction to tuberculin	10	No evidence of active tuberculosis Dead Not traced	3 4 3
Doubtful reaction	3	No evidence of active tuberculosis Probably active tuberculosis	2 1

Tested 1923		Condition February, 1924	
No reaction to tuberculin	2	No evidence of active tuberculosis Probably not active	1 1
Positive reaction	1	No evidence of active tuberculosis	1

ABERGELE SANATORIUM.

REPORT FOR THE YEARS ENDING DECEMBER 31ST, 1923, AND DECEMBER 31ST, 1924, BY DR. A. G. M. GRANT, MEDICAL SUPERINTENDENT.

During the year ending December 31st, 1923, 103 patients were admitted to the Sanatorium, including 1 readmission, and a similar number was discharged. In addition, 5 children with "surgical" tuberculosis were admitted to Pen-y-Coed Bungalow and 5 were discharged. Of these, 4 had open lesions on admission, 3 of which on discharge were healed.

Table 1 shows a classification according to age and sex of the cases under treatment :—

Ages	Males			Females		
	Admitted	Discharged	Died	Admitted	Discharged	Died
0 to 4 ..	1	1	..	2	..	..
5 ,, 14 ..	1	1	..	1	3	..
15 ,, 24 ..	26	16	..	11	11	..
25 ,, 34 ..	16	19	..	6	6	..
35 ,, 44 ..	26	33	..	2	1	..
45 ,, 54 ..	16	16	..	..	1	..
54 ,, 65 ..	..	..	..	..	..	..
65 up ..	..	..	..	..	..	..
Total ..	86	86	..	22	22	..

Table 2 shows a classfiication of the immediate results of treatment in the discharged pulmonary cases.

(*a*) Patients in whose sputum tubercle bacilli were found :—

	No. of Cases	Disease Quiescent	Much Improved	Improved	Stationary or Worse	Died
Stage i. ..	12	2	9	..	1	..
,, ii. ..	7	..	2	4	1	..
,, iii. ..	24	..	7	10	7	..
Total ..	43	2	18	14	9	..

(*b*) Patients in whose sputum tubercle bacilli were not found :—

	No. of Cases	Disease Quiescent	Much Improved	Improved	Stationary or Worse	Died
age i. ..	33	20	8	4	1	..
,, ii. ..	12	..	8	3	1	..
,, iii. ..	14	..	2	9	3	..
Total ..	59	20	18	16	5	..

One patient was considered not to be tuberculous, but to be suffering from ronchial catarrh.

Table 3 shows the result of treatment in the discharged tuberculous patients relation to their working capacity, and to any alteration in their lung ndition from the anatomical standpoint (Turban-Gerhardt classification).

Patients in whose sputum tubercle bacilli were found.

(*a*) Patients discharged with working capacity fully restored :—

Males						Females					
Stage on dmission	Number Treated	Stage on Discharge				Stage on Admission	Number Treated	Stage on Discharge			
		0	1	2	3			0	1	2	3
1	2	..	2	..	..	1	..	..	..	..	..
2	1	..	1	..	..	2	..	..	..	..	..
3	..	..	..	..	..	3	..	..	..	..	..
Total ..	3	..	3	..	..	Total ..	..	..	..	..	..

(*b*) Patients discharged with working capacity incompletely restored :—

Males						Females					
Stage on Admission	Number Treated	Stage on Discharge				Stage on Admission	Number Treated	Stage on Discharge			
		0	1	2	3			0	1	2	3
1	4	..	4	..	..	1	..	..	..	..	..
2	7	1	2	4	..	2	..	..	..	..	..
3	14	..	1	2	11	3	2	..	..	..	2
Total ..	25	1	7	6	11	Total ..	2	..	..	..	2

(*c*) Patients discharged without restoration of working capacity :—

Males						Females					
Stage on Admission	Number Treated	Stage on Discharge				Stage on Admission	Number Treated	Stage on Discharge			
		0	1	2	3			0	1	2	3
1	1	..	1	..	..	1	..	..	..	..	..
2	1	..	..	1	..	2	..	..	..	..	..
3	8	..	..	..	8	3	3	..	..	..	3
Total ..	10	..	1	1	8	Total ..	3	..	..	..	3

Patients in whose sputum tubercle bacilli were not found.

(*a*) Patients discharged with working capacity fully restored :—

Males						Females					
Stage on Admission	Number Treated	Stage on Discharge				Stage on Admission	Number Treated	Stage on Discharge			
		0	1	2	3			0	1	2	3
1	15	11	4	..	..	1	4	1	3	..	..
2	4	1	2	1	..	2	2	1	1	..	..
3	..	..	..	..	..	3	..	..	..	..	..
Total ..	19	12	6	1	..	Total ..	6	2	4	..	..

(*b*) Patients discharged with working capacity incompletely restored :—

Males						Females					
Stage on Admission	Number Treated	Stage on Discharge				Stage on Admission	Number Treated	Stage on Discharge			
		0	1	2	3			0	1	2	3
1	4	..	4	..	..	1	2	1	1	..	..
2	11	..	2	9	..	2	..	..	..	..	..
3	9	..	..	2	7	3	3	..	1	..	2
Total ..	24	..	6	11	7	Total ..	5	1	2	..	2

(*c*) Patients discharged without restoration of working capacity :—

Males						Females					
Stage on Admission	Number Treated	Stage on Discharge				Stage on Admission	Number Treated	Stage on Discharge			
		0	1	2	3			0	1	2	3
1	..	..	..	..	..	1	..	..	..	..	..
2	..	..	..	..	..	2	..	..	..	..	..
3	3	..	..	..	3	3	2	..	..	..	2
Total ..	3	..	..	..	3	Total ..	2	..	..	..	2

Of the discharged patients 91 gained in weight, the average gain being 10 lbs. 3 ozs. ; 3 lost in weight, with an average loss of 3 lbs. ; 1 remained stationary ; while 8 were not weighed. During July, when the heat was extreme, the gains were the lowest, averaging less than 1 oz. per week, while the greatest gains were recorded in November, with a weekly average gain of 13½ ounces.

During the year ending December 31st, 1924, 113 patients were admitted to the Sanatorium, including 1 readmission, and 107 were discharged. In addition, 8 children with surgical tuberculosis were admitted to Pen-y-Coed Bungalow, and a similar number was discharged. In 5 of these the disease was arrested.

Table 1 shows a classification according to age and sex of the cases under treatment.

Ages	Males			Females		
	Admitted	Discharged	Died	Admitted	Discharged	Died
0 to 4 ..	2	..	..	..	..	..
5 „ 14 ..	3	2	..	3	6	..
15 „ 24 ..	27	26	..	10	10	..
25 „ 34 ..	23	22	..	8	9	..
35 „ 44 ..	32	23	..	6	5	..
45 „ 54 ..	6	12	..	..	..	..
55 „ 65 ..	1	..	..	..	..	..
65 up ..	..	..	..	..	..	..
Total ..	94	85	..	27	30	..

Table 2 shows a classification of the immediate results of treatment in the discharged pulmonary cases.

(*a*) Patients in whose sputum tubercle bacilli were found :—

	No. of Cases	Disease Quiescent	Much Improved	Improved	Stationary or Worse	Died
Stage i. ..	9	5	3	1	..	..
,, ii. ..	13	2	4	4	3	..
,, iii. ..	34	3	5	19	7	..
Total ..	56	10	12	24	10	..

(*b*) Patients in whose sputum tubercle bacilli were not found :—

	No. of Cases	Disease Quiescent	Much Improved	Improved	Stationary or Worse	Died
Stage i. ..	29	22	1	4	2	..
,, ii. ..	13	4	4	5	..	..
,, iii. ..	9	..	2	6	1	..
Total ..	51	26	7	15	3	..

Table 3 shows the result of treatment in the discharged tuberculous patients in relation both to their working capacity and to any alteration in their lung condition from the anatomical standpoint (Turban-Gerhardt classification).

Patients in whose sputum tubercle bacilli were found.

(*a*) Patients discharged with working capacity fully restored :—

Males						Females					
Stage on Admission	Number Treated	Stage on Discharge				Stage on Admission	Number Treated	Stage on Discharge			
		0	1	2	3			0	1	2	3
1	4	1	3	..	..	1	1	..	1	..	..
2	1	1	..	..	..	2	..	..	..	..	..
3	1	..	1	..	..	3	1	1	..	..	..
Total ..	6	2	4	..	..	Total ..	2	1	1	..	..

(*b*) Patients discharged with working capacity incompletely restored :—

Males						Females					
Stage on Admission	Number Treated	Stage on Discharge				Stage on Admission	Number Treated	Stage on Discharge			
		0	1	2	3			0	1	2	3
1	3	1	2	..	..	1	1	..	1	..	..
2	9	1	3	5	..	2	..	..	..	..	..
3	18	..	..	5	13	3	4	..	..	..	4
Total ..	30	2	5	10	13	Total ..	5	..	1	..	4

(*c*) Patients discharged without restoration of working capacity :—

Males						Females					
Stage on Admission	Number Treated	Stage on Discharge				Stage on Admission	Number Treated	Stage on Discharge			
		0	1	2	3			0	1	2	3
1	..	..	..	..	..	1	..	..	..	..	..
2	2	..	..	1	1	2	1	..	..	..	1
3	8	..	..	..	8	3	2	..	..	..	2
Total	10	..	..	1	9	Total ..	3	..	..	..	3

Patients in whose sputum tubercle bacilli were not found.

(*a*) Patients discharged with working capacity fully restored :—

Males						Females					
Stage on Admission	Number Treated	Stage on Discharge				Stage on Admission	Number Treated	Stage on Discharge			
		0	1	2	3			0	1	2	3
1	14	11	3	..	..	1	6	6	..	..	..
2	3	1	1	1	..	2	..	..	..	..	..
3	..	..	..	..	..	3	..	..	..	..	..
Total ..	17	12	4	1	..	Total ..	6	6	..	..	..

(*b*) Patients discharged with working capacity incompletely restored :—

Males						Females					
Stage on Admission	Number Treated	Stage on Discharge				Stage on Admission	Number Treated	Stage on Discharge			
		0	1	2	3			0	1	2	3
1	4	..	4	..	..	1	3	1	2	..	..
2	7	..	2	5	..	2	2	..	..	2	..
3	5	..	..	3	2	3	1	..	..	..	1
Total ..	16	..	6	8	2	Total ..	6	1	2	2	1

(*c*) Patients discharged without restoration of working capacity :—

Males						Females					
Stage on Admission	Number Treated	Stage on Discharge				Stage on Admission	Number Treated	Stage on Discharge			
		0	1	2	3			0	1	2	3
1	1	..	1	..	..	1	1	..	1	..	..
2	1	..	..	1	..	2	..	..	..	..	..
3	2	..	..	..	2	3	1	..	..	..	1
Total ..	4	..	1	1	2	Total ..	2	..	1	..	1

Of the discharged patients 90 gained in weight, with an average gain of 10 lbs. 14¼ ozs. ; 8 lost in weight, the average loss being 2 lbs. 2½ ozs. ; 1 remained stationary ; while 9 were not weighed.

The general principles of the treatment were the same as in former years. In addition to lectures being given at intervals, opportunity was taken to discuss with patients individually the nature of the disease and the rationale of the treatment.

During 1923 an additional bed was created at the Sanatorium by the conversion of a ship's cabin into a shelter, and a revolving shelter was erected at Pen-y-Coed to provide more accommodation for the children.

Towards the latter end of 1924 a shelter for 5 beds was erected at the Sanatorium, making the total number of beds 62, of which 42 are reserved for men, 10 for women, and 10 for children.

Three patients had had artificial pneumothorax. In one case good collapse was obtained with a very satisfactory result. A small pleural effusion developed during the course of the treatment, but gradually became absorbed without ny interference. The second patient also improved, but after 4 months, in hich she had had 11 injections, the treatment had to be abandoned owing the return of asthma, from which she had suffered two years previously. he third was discharged with working capacity restored.

Laboratory.—Examination of sputum for tubercle bacilli was the principal art of the work undertaken. In addition to the direct method of examination se had been made of the Antiformin method, the solution consisting of equal arts of liquor sodæ chlorinatæ and caustic soda 15 per cent. The technique nployed was as follows :—Equal parts of sputum and a 30 per cent. aqueous olution of Antiformin were placed in a centrifuge, and after disintegration nd solution had taken place the deposit was examined for tubercle bacilli. he results obtained by this method failed to show that it possessed any utstanding value. In no case were tubercle bacilli found where successive xaminations by the direct method had been negative.

Blood examinations were also made, especially with reference to the Arneth ount, on similar lines as described in a former report.

Estate.—An ample supply of milk, eggs, and vegetables for the needs of the anatorium was provided by the farm and garden.

EPORTS OF THE PUBLIC HEALTH COMMITTEE AND THE FINANCE COMMITTEE AS TO AN APPLICATION FOR BORROWING POWERS FOR THE ERECTION OF A CHILDREN'S HOSPITAL AT ABERGELE.

1.—REPORT OF THE PUBLIC HEALTH COMMITTEE.

The Public Health Committee are of opinion that the existing accommodation t Abergele Sanatorium for the treatment of tuberculosis in children up to 15 ears of age should be extended. In support of that view they present the ollowing report :—

Proposal.

It is proposed that a Sanatorium be provided for the provision of 546 beds. f these, 500 are for actual beds, 24 for a quarantine admission block, and 22 eds for isolation purposes (*i.e.*, for use in the event of infectious outbreaks in he Sanatorium).

It is proposed in the first instance to provide 210 beds as the first stage of he complete scheme.

The Public Health Committee have had before them schemes for the treatment of tuberculous children since 1914, and it is felt that the matter demands rgent attention.

Principal Reasons for the Provision of Treatment.

There is a very large number of children suffering from tuberculosis, bo pulmonary and non-pulmonary, in Manchester, and the existing accomm dation for the treatment of these cases is totally inadequate to meet the deman This is true both with regard to the number of beds and type of treatme provided. It will be seen subsequently that the possibilities for modern trea ment by sunlight are very restricted in the existing accommodation.

The treatment of this disease in childhood is urgently called for, inasmu as deformities and physical incapacitation in later life in the individual can be prevented. Risk of infection of other persons is also reduced.

The earlier the age at which treatment is begun the better, since interferen with growth and development is thereby minimised. If not cured in childhoo children will suffer from deformities and other affections from which recove cannot be so complete, and after school age, when the ordinary work of life entered upon, many of the cases, if not treated in the early years of life, w break down and become a danger to the public as well as causing incapacitati individually.

The Ministry of Health, in Circular 73 dated 30th June, 1920, said :—

> I am to add that in the experience of the Ministry the existing provisi in the country generally for the treatment in residential institutions of nc pulmonary tuberculosis is especially deficient ; and I am accordingly to dr the attention of Councils to the importance of at once formulating propos for the provision of institutions for the treatment of this form of tuberculosi

Again, on 8th February, 1924, the Ministry of Health issued the followi Circular :—

> Circular 474
> (England).
> Ministry of Health,
> Whitehall, S.W. 1,
> 8th February, 1924.
>
> Sir,—I am directed by the Minister of Health to refer to the Circulars issu by his predecessors in February, 1921 (No. 182), and on the 18th March, 19 (No. 295).
>
> The Government have considered the provisions of these Circulars in far as they relate to the grant-aided public health services (maternity a child welfare, tuberculosis, venereal disease, welfare of the blind, and p sanitation), and have decided to revert generally to the position which previou existed. The Minister will accordingly be prepared, with the approval Parliament, to make grants on the prescribed basis for such further developm of these schemes as is considered advisable by, and is within the power of, t authority, subject of course to the ordinary process of approval of the particu proposal by the Ministry.
>
> I am, Sir,
> Your obedient Servant,
> W. A. Robinson,
> *Secretary.*
>
> The Clerk of the Council.

Further Circulars relating to the provision of accommodation for tuberculosis are printed in Appendix A.

On December 1st, 1920, the City Council approved a scheme for accommodation for 500 children, and application was made to the Ministry of Health for borrowing powers to carry out the scheme. After some delay the Ministry of Health issued a Circular Letter intimating that H.M. Treasury were not prepared to sanction grants for such purposes until more normal conditions prevailed; consequently the scheme has not matured.

Type of Treatment to be Afforded at the Sanatorium.

It is now generally recognised that if taken early enough non-pulmonary tuberculosis can best be treated by what is known as expectant treatment, or more plainly, by the sun cure. This means a properly controlled exposure to, and treatment by, sunlight. Part of the non-luminous rays coming from the sun (the ultra-violet rays) exert very profound influences upon the body. This treatment was originated and has been profoundly studied and carried out by Dr. Rollier at Leysin for over 20 years. It has been used at various other places, such as Berck-sur-Mer, Alton in Hampshire, and to a smaller extent at Swinton House, near Manchester, and at our existing beds in Abergele. Even a slight haze from smoke prevents the passage of a great proportion of the ultra-violet rays, and it is essential that an establishment provided for this treatment of tuberculosis should be in such a situation as to ensure the largest and most reliable sunshine provision possible. In a later paragraph the climatic conditions of Abergele, as shown by the Rhyl records, are given. This part of North Wales is much the sunniest region within easy reach of Manchester, and is undoubtedly the best region for the sun treatment of tubercle. Experience with the cases treated in the 10 beds provided for children at the Abergele Sanatorium during the past 10 years has demonstrated the fact that this treatment can be given with complete success at Abergele. If the cases are obtained early enough the sun treatment of non-pulmonary tubercle practically entirely abolishes ordinary surgical operation.

The treatment of pulmonary tuberculosis consists of a combination of fresh air and sun treatment, sun treatment alone not having been found so effective as in the non-pulmonary type. Abergele provides ideal combination of open-air treatment and sun treatment. It stands at an elevation of nearly 500 feet, and is only about 1½ or 2 miles from the sea shore, and there is, therefore, the combined advantage of hill and sea.

Period of Treatment Required.

Non-Pulmonary.

The periods of treatment required for tubercular children, and used in this report as part of the basis for the estimate of the number of beds to be provided, is based upon the knowledge which has been obtained at the Sanatoria in Leysin, Switzerland, and in our own existing 10 beds at Abergele. The modern treatment by sunlight of this disease was initiated over 20 years ago at Leysin, and in August last the Medical Officer of Health and Dr. D. P. Sutherland visited Leysin and went into this matter with the medical staff there, who were agreed that 1½ years was a reasonable average period of treatment for these cases.

The experience at Abergele is shown by the subjoined figures, which cover the period of four years 1920-1923, and refer only to children :—

Number of cases discharged ..	22
Average duration of treatment ..	2 years and 2 weeks.

The greater duration of treatment at Abergele as compared with Switzerland is fairly certainly due to two causes. First—that good as the sunlight records are at Abergele, the direct sunlight is not so continuous as in the high alpine districts of Switzerland. Secondly—the cases which have been treated at Abergele have included many very bad ones, and average cases will probably not need quite such a long stay.

In estimating, therefore, the provision needed, the period of treatment of non-pulmonary cases in children is taken at 1½ years.

Pulmonary.

It is difficult to obtain accurate data of the average period of treatment required for the complete arrest of tubercular disease of the lungs in children, inasmuch as provision of this nature has been scanty. There is ample evidence however, to show that in adults the arrest of pulmonary tubercle requires longer periods of treatment than that which is ordinarily available for adult cases, either due to lack of institutional accommodation or to personal reasons affecting the individual. So far as children are concerned, the personal or family reasons are unlikely to arise, and may therefore be dismissed. In general, it may be said that the period of 4½ or 5 months in the adult does not arrest disease, and in those instances where prolonged treatment is possible not less than one or more years of treatment is given, and generally it extends into the longer periods. It is obvious that if children are to be treated it is futile to make provision for anything less than that which, it may be hoped, will effect permanent arrest of the disease, and it is the considered opinion of the Medical Officer of Health and the Senior Tuberculosis Officer that cases of established pulmonary tuberculosis in children should stay in Sanatorium for a year to a year-and-a-half, preferably the latter length of time.

The basis of calculation, therefore, has been taken as 1½ years for all types of children's tubercle.

STATEMENT A.

Number of Cases of Tuberculosis in Manchester existing and occurring in Children under 15 years of age.

Non-pulmonary.

Notifications during the Years 1913 to 1923 :—

1913	*1914*	*1915*	*1916*	*1917*	*1918*	*1919*	*1920*	*1921*	*1922*	*1923*	*Average 11 years*
968	*628*	*517*	*537*	*562*	*436*	*261*	*329*	*361*	*391*	*441*	*494*

Deaths during the Years 1913 to 1923 :—

1913	*1914*	*1915*	*1916*	*1917*	*1918*	*1919*	*1920*	*1921*	*1922*	*1923*	*Average 11 years*
287	*293*	*226*	*254*	*252*	*181*	*151*	*138*	*145*	*167*	*124*	*202*

Average for Four Years—1920 to 1923.

Notifications	*381*
Deaths	*144*
Annual Survivals	*237*

Number in Manchester at present.

Eleven years, 1913 to 1923—Notified	*5431*
,, ,, ,, *—Deaths*	*2218*
Proportional reduction for persons attaining 15 years of age ...	*1353*[*]
Remain	*1860*

---

[*] *This number (1,353) represents the number of cases of non-pulmonary tuberculosis between 15 and 25 years of age.*

Pulmonary.

Notifications during the Years 1913 to 1923 :—

1913	1914	1915	1916	1917	1918	1919	1920	1921	1922	1923	Average 11 years
566	621	530	611	395	268	284	256	265	243	213	387

Deaths during the Years 1913 to 1923 :—

1913	1914	1915	1916	1917	1918	1919	1920	1921	1922	1923	Average 11 years
67	94	99	82	86	79	32	40	45	41	41	64

Average for Four Years—1920 to 1923.

Notifications	244
Deaths	42
Annual Survivals	202

Number in Manchester at present.

Eleven years, 1913 to 1923—Notified	4252
,, ,, ,, *—Deaths*	706
Proportional reduction for persons attaining 15 years of age ...	1569*
	1977

* *This number (1,569) represents the number of cases of pulmonary tuberculosis between 15 and 25 years of age.*

STATEMENT B.

Statement as to Examined Cases.

With a view to ascertaining as accurately as possible the requirements in Manchester for treating pulmonary and surgical tuberculosis in children the following table has been prepared :—

Statistics relating to Children, aged 0 to 15 (inclusive), notified in the Three Years 1st May, 1921, to 30th April, 1924.

	Pulmonary		*Non-Pulmonary*	
	Males	*Females*	*Males*	*Females*
1. *Total number notified*	356	367	641	550
2. *Number examined by Consultants*	278	318	410	335
3. *In Institutions at time of notification* ..	119	101	210	181
4. *Subsequently recommended for Institutional Treatment*	127	154	168	118
5. *Subsequently received Institutional Treatment*	88	112	137	123

From this the following facts appear :—

There were notified 723 cases of pulmonary tuberculosis. 501 of these were recommended for institutional treatment, and 420 received it at one or other of the hospitals or homes.

The ratio of examined to notified cases is approximately as 5 is to 6, on account of a number failing to attend when sent for.

There were, therefore, 600 cases who would have been recommended for treatment out of the 723 notified.

This is in a period of three years, and the requirements for one year would be roughly one-third of this, i.e., *200.*

From enquiries made this month (November, 1924) there are approximately 154 beds available for Manchester tubercular children suffering from pulmonary tuberculosis.

Turning now to Surgical Tuberculosis we find that 1191 cases were notified, and 677 were recommended treatment and 651 received it, but as a rule only for a very short period.

The ratio of examined to notified cases is approximately 7·5 to 12, and we find that about 1080 cases required treatment out of the 1191 notified.

For one year this number would be 360 (plus probably another third, if allowance be made for non-notified cases).

The number of beds at present available is 174. This falls far short of the number required. If we take the figure 360 and add to it 180 to allow for 18 months' treatment, we find the number of beds needed is 540, and with the number existing we are left with a deficit of 366 beds for Surgical Tuberculosis.

It is impossible to obtain more accurate figures than these, and it is also impossible to ascertain even approximately the number of pulmonary cases who go unnotified. With greater provision made for treatment more cases would naturally come forward.

From these statements "A" and "B" it is necessary to estimate the number of beds which are required. Taking statement "A" and referring only to the annual survivals in pulmonary tubercle, there are 202 cases. There exist in and about Manchester 154 beds for the treatment of these cases, and, of these, only 116 provide treatment which can be described as of a modern type. We must, therefore, estimate that 38 out of the 154 beds have to be provided for at Abergele, in addition to the balance of 48 beds which are not provided at present. On the basis of 1½ years' treatment this gives a need of 129 beds.

In non-pulmonary tubercle from statement "A" we have 237 survivals, and there exist 174 beds in and about Manchester. Of these only 57 provide reasonably modern treatment, leaving 117 beds which should be reckoned as having to be provided for in the new Hospital at Abergele, in addition to the balance of 63 beds which are not provided at present. On a basis of 1½ years' treatment this shows a need for 270 beds for non-pulmonary tubercle.

We therefore arrive at a total of 399 beds required at Abergele, based upon the annual survivals given in statement "A."

From statement "B" the returns are much higher. This statement gives a more correct estimate of the number of cases which should be recommended each year for treatment, inasmuch as it is based on the actual examinations made of patients at the Tuberculosis Dispensary, and is not simply a return from notifications and deaths as in statement "A."

The annual number estimated in statement "B" to be recommended for treatment on this basis is 200 cases of pulmonary tubercle and 360 cases of non-pulmonary tubercle. Allowing in the same manner for existing beds as in the previous paragraphs, and on the basis of 1½ years for each case, this shows a need of 126 beds for pulmonary tubercle and 454 beds for non-pulmonary tubercle, or a total of 580 beds.

No allowance in these two calculations has been made for the accumulated cases of past years. The true statement of the number of beds needed probably lies between the two figures of 399 and 580. There is also to be taken into account the fact that a certain proportion of the cases will refuse treatment and a very considerable proportion of the accumulated cases will not come up for treatment, but in any case there is ample evidence to support the Committee's view that 500 beds is not by any means too large an estimated number.

Education.

In so far as the educational work is concerned the following paragraphs are extracted from the report made in 1920, when the scheme was approved by the City Council :—

> The Public Health Committee have felt that the work of the proposed institution would be unfinished unless the older children were trained to earn their own livelihood, and workshops have been provided to that end, as at Alton.
>
> It is also necessary, as at Swinton House and other centres for expectant treatment, that education should be provided for the children during their prolonged stay in the Sanatorium. Interviews on the subject have taken place between the Public Health Committee and the Education Committee, and an understanding has been arrived at. The Education Committee will undertake the supervision of education, and of the staff of teachers, so far as teaching is concerned. As regards the general rules of the institution, the Medical Superintendent will be responsible for all persons residing at the Sanatorium.

The number of children requiring to be taught in school has been taken at four-fifths of the pulmonary cases and one-fifth of the non-pulmonary cases. This gives 208. But 200 will be ample. The number of teachers has been fixed at 24, following the experience of Heswall, and having regard to the consideration that much of the teaching will be done in the wards.

Site.

The site chosen is on the Committee's estate at Abergele, and consists of 25 acres, is open, stands on an elevated piece of ground opposite Plas Uchaf House, and is partly sheltered by higher ground on the south-east and north-east, besides receiving protection from higher land towards the west. But it admits of ample ventilation all round.

The subsoil is dry, consisting of gravel with underlying shale and rock.

The climate is admirably adapted for the treatment of tuberculosis children, as the amount of sunshine is high and the rainfall comparatively low. This will be evident from the following facts, which relate to Rhyl, the climate of which may be taken to be practically the same as that of the Sanatorium :—

Monthly Normals of Temperature, Rainfall, and Sunshine in Rhyl and Manchester.

(*Extracted from the Book of Normals (Meteorological Office), 1881-1915*).

Month	Mean Temperature (F.)		Hours of Bright Sunshine		Rainfall (Inches)	
	Rhyl	Manchester	Rhyl	Manchester	Rhyl	Manchester
January ..	40·4	39·5	2·10	0·45	1·76	2·87
February ..	40·9	40·4	2·77	1·28	1·46	2·21
March ..	42·3	42·5	4·32	2·58	1·71	2·58
April	46·2	47·1	5·87	4·33	1·44	1·95
May	51·2	53·3	7·10	5·13	1·66	2·42
June	57·0	59·1	7·07	5·70	1·92	2·67
July	59·4	61·5	6·52	4·65	2·22	3·21
August ..	59·2	60·6	5·90	3·97	2·70	3·69
September ..	55·9	57·2	4·97	3·63	2·08	2·65
October ..	50·0	50·5	3·39	2·16	3·24	3·50
November ..	45·0	44·2	2·20	0·53	2·39	2·96
December ..	42·0	41·0	1·55	0·23	2·50	3·55
Year ..	49·1	49·8	4·49	2·89	25·08	34·26

Annual Rainfall.

(*Taken from "British Rainfall."*)

Year	Rhyl	Colwyn Bay Council Offices	Manchester	Liverpool	Denbigh (Asylum	Southport
1914 ..	26·42	29·76	35·29	31·41	36·77	32·14
1915 ..	25·69	33·69	33·81	32·25	32·92	31·95
1916 ..	28·68	31·36	33·30	30·90	33·12	31·33
1917 ..	29·29	32·59	34·64	35·78	32·06	33·63
1918 ..	29·21	33·16	44·28	37·99	32·26	40·01
Average 5 years ..	27·86	32·11	36·26	33·67	33·43	33·81

The following report of the City Architect has been carefully considered by the Committee :—

Proposed Children's Hospital at Abergele for 546 *Beds.*

The City Architect submits herewith plans and estimates of the proposed Children's Hospital at Abergele.

The Porter's Lodge is placed at the junction of the two new roads and opposite to the laundry block, and commands all traffic to the Hospital, Plas Uchaf, and Pen-yr-Allt. It contains on the ground floor an office facing a weighbridge, parlour, living room, and a scullery with larder ; three bedrooms and bathroom on the upper floor.

The Laundry Block is placed, as before, along the main Hospital road, in front of the entrance gates. The laundry, with receiving and dispatch, ironing and drying rooms, is entered from the road level, the boiler and engine house with generating plant and engineer's workshop being 4ft. lower than the laundry level. The pipe duct runs from this level to the administrative block and thence under the main Hospital corridor, branches being taken to the various buildings. A coal store is provided under the roadway.

Workshops are built over the laundry, extending practically the full length of the block, entered at the centre from the road.

Adjacent to the boiler house on the Hospital side of this block is the sputum plant, destructor, and disinfecting house, with garage for ambulances and cars.

The Mortuary is situated behind the laundry block at a much lower level, and is approached by a path descending from the main Hospital road, bodies for interment being taken away out of sight of any Hospital buildings. This building contains a mortuary sufficient for six tables, viewing room, with separate entrance, post-mortem and pathological rooms.

The Administrative Buildings, comprising Medical Officer's and Matron's quarters, kitchen and stores, patients' and staff dining halls, is placed near the entrance. Two branch roads of easy gradient serve this block, one leading to the kitchen, yard, and store rooms, and the other to the main entrance of the building and to visitors' entrance, also admission ward, forming a quadrangle about 240ft. by 160ft., with ample space for tennis and croquet. The entrance hall leading to a corridor 6ft. wide gives access to the Principal Medical Officer's general and private offices, Matron's rooms, Medical Officer's wing, containing on the ground floor dining room 17ft. 6in. by 13ft., committee room 26ft. by 17ft. 6in., and lavatory. These rooms are conveniently near the still and service rooms for dining purposes. On the upper floor of this wing are Assistant Medical Officer's sitting and bedrooms, bath and lavatory, linen room, and spare bedroom.

Kitchen and Stores Block.—A large open area cuts off the kitchen from the main corridor of the administrative building, which, with its offices and stores, is a single storey building, and open on all sides to light and air. The general arrangement of the room is similar to the previous plans.

Entered from the kitchen yard is a loading way, with checking and weighing office, leading to store rooms across the open area. The kitchen is top and side lighted, with opening lantern lights all round. The flat adjoining the open area is ceiled at 10 feet, thus allowing ample light and ventilation direct to the kitchen.

Dining Rooms, etc.—The first floor, which is also the Hospital floor level, contains the whole of the dining accommodation for children and staff, and is placed at the end of the main Hospital corridor. The patients' dining hall has table accommodation for 400.

Separate dining rooms giving accommodation for the sisters, nurses, teachers, and maids are shown entered from the Hospital corridor. A service room and scullery, equipped with lifts and hot plates, from which all meals will be served, is provided for patients and staff, all crockery, cutlery, etc., for the latter being entirely separate from that of the patients.

A boys' lavatory and cleaners' sink room is provided at the end of the large dining hall, and lavatories for girls and the staff are provided separately on flat roofs outside the sculleries. A plaster and splint room and laboratory are provided over the general and bedding stores, and medical stores and dispensary at the entrance to the operating block, all these rooms being entered from the main Hospital corridor.

Principal Medical Officer's Residence.—This house is placed at the S.W. corner of the quadrangle in front of the administrative building, and in line with M.O.'s wing. It contains on the ground floor dining room and parlour, with kitchen, scullery, larder and servants' room, and fuel store in yard. The upper floor contains four bedrooms, with bathroom and separate W.C. The front entrance faces the tennis court, the aspect being south.

Operating Block.—This building is placed between the administrative buildings and the first surgical pavilion on the main corridor adjoining the main staircase, and contains dispensary serving direct to the corridor, dental and throat rooms, X-ray room, operating theatre with anæsthetic and sterilising rooms on either side, recovery ward with W.C. and sink room and sisters' duty room.

Admission Ward.—This single-storey building is connected to the ground floor corridor of administrative building by a covered way which runs the full length of the 24 single wards. Patients enter from the road between the store rooms. Each ward is divided by large plate-glass panels in partitions, giving easy observation by the nursing staff. The front of each ward has glazed folding partitions practically the full height of the room, and opening on to an uncovered sun balcony; through ventilation provided to each room. A sanitary block for each sex is placed centrally between the wards, separated by the covered way, each containing separate bathroom, lavatory, and W.C.'s, sink room with macintosh cleaning slab, and open covered platform for soiled linen bins and trolley space. Service room with linen rooms, larder, and staf lavatory, are placed at the entrance. The duty room is placed central between the 12 single wards, and has supervision over all wards and sanitary blocks by means of inspection windows on both sides.

Juvenile Wards.—These two buildings each contain a central service room with separate duty room cut off from the wards by a narrow corridor, with sun and linen room in front, and staff lavatory, larder and bathroom, sink room, and W.C 's at the rear. A ward 55ft. by 9ft. is on each side of the duty room, providing ten beds each, placed on the stall principle, with low plate-glass screens between every couple of beds. In front of the wards a verandah 11ft. wide is provided on to which the beds may be wheeled. Direct ventilation and light is obtained by means of opening lights above verandah and windows on rear wall. Fronts of wards are filled with glazed doors.

Pavilions.—These buildings consist of a central duty block, with wards on either side 91ft. 4in. by 20ft. for 36 beds in two of the six pavilions. The remaining blocks contain two large wards of 38 beds each, and all pavilions have two single-bed wards immediately in front of the duty room. The sanitary annexe and bathrooms are independent of each other, and are approached from the wards. A verandah 13ft. wide, covered for a distance of 8ft. with a flat roof, runs the full length of the pavilion, and is also the connection to the main Hospital corridor. Space for all the beds is provided for on this verandah and a patients' cloak room and drying room, together with boot-cleaning room for each ward, is placed at the ends of the wards. An octagonal-shaped day or sun room is provided in front of the centre of the buildings.

The central duty block contains service room fitted with sinks, hot-plate table, etc., and small store and larder. A sisters' duty room is placed on either side of this service room, having direct supervision to both the wards, corridor and kitchen. A linen room for each ward is provided, entered from the corridor between each ward, staff cloaks being placed in the short passage leading from the day room to the service rooms.

Direct sunshine and air are admitted to the wards by means of opening windows over the flat verandah and on the rear wall, and through ventilation is obtained by the same windows. The whole of the front of wards will be fitted with glazed screens and wide glazed swing doors which may be opened at will.

The wards are heated by hot-water pipes suspended from the ceiling.

Isolation Blocks.—These two buildings are situated on the slope above the road leading to Plas Uchaf, and below the general level of the Hospital site, and each have a south aspect. Access is obtained from the road leading off the main corridor. One block contains 10 beds, the other 12 beds.

The combined duty room and kitchen is in the centre of each block, having inspection windows direct to the wards. Each room is divided by plate-glass and concrete partitions. A connecting corridor is provided at the back of each, and gives access to the bath room, sink room, linen and blanket store, staff and patients' W.C.'s.

An open sun platform 4ft. 6in. wide runs the full length of the building in front of each ward, on to which double glazed folding doors open.

Nurses' and Maids' Home.—This building contains three storeys, and provides accommodation for the whole of the nursing and domestic staff. It is situated on a slope below the Hospital pavilions on the southerly side, with a south-westerly aspect.

Access is obtained by a road from the main Hospital road, branching right to the staff nurses' and probationers' entrance, and left to the maids' entrance. From each entrance and staircase hall runs a corridor giving access to the various bedrooms, recreation and reading rooms. The middle floor provides accommodation for home and night sisters' quarters, 21 staff nurses, and 21 probationers. The majority of the probationers are housed on the floor below. Wings lead off adjoining the maids' entrance and from either end of the corridor, containing service and linen rooms, bathrooms, and lavatories. Two boxrooms are provided, one adjacent to each entrance. Visitors to extreme cases have been provided with bedrooms adjoining the staircase and sanitary wing.

Sick bays each containing two separate bedrooms, with bath and lavatory, are placed in the north west and south wings, four beds on the middle floor for nurses, and four beds on the upper floor for maids. Cloakrooms and drying rooms are provided on the lower floor near each entrance.

Fifty-three of the probationer nurses are placed on the lower ground floor. A large sitting room and separate reading room is provided. A large common recreation room, 38ft. by 19ft. 6in., forms the whole south wing. Service rooms, lavatories, linen and bathrooms are provided as on the floor above.

The whole of the maids are placed on the upper floor, and are divided, as shown, into single and double-bedded rooms. Recreation and reading rooms are placed in the centre, and lavatory and bath rooms in the wings at either end, and adjoining the entrance and staircase.

Sisters' Home is on the south-west side of the quadrangle, and fronting the main Hospital road. Advantage has been taken of the fall in the land on the southerly side to secure store rooms, cycles, etc. The entrance floor contains entrance hall and staircase flanked by recreation and writing rooms, service and bedrooms on either side. At one end of the corridor is the Assistant Matron's bed and sitting room, bath, etc. ; at the other end is cloaks and drying room, linen room, lavatories, and W.C.'s. The lower floor is occupied by four bedrooms, boxrooms, stores, and cycle room. A sick room, with bath and lavatory, is placed at the southerly end of home on this floor. The home provides accommodation for 20 sisters.

Teachers' Home is situated at the south end of site. It contains accommodation for 22 teachers, the ground floor having entrance hall and staircase, from which runs a corridor with bedrooms on either side, lavatories at one end and recreation and sitting room at the other. The whole of the first floor is occupied by bedrooms ; lavatories and bathrooms being at each end of the building.

School and Covered Playgrounds.—This building, providing accommodation for 100 scholars, is at the extreme end of the main corridor, and consists of two separate classrooms for each sex, for 25 scholars (single-desk type), together with separate cloak rooms, lavatories, store, and cleaners' sink, etc.

The covered playgrounds are simply a continuation of the roof over a concrete floor, with sun balcony.

Drainage and Main Outfall.—It is proposed to adopt separate drains for soil and surface water, the latter being filtered and stored in a reservoir close to the laundry block, and used for supplying the boilers, etc. The soil drains will be carried down the bed of the River Gele, and connect with the Abergele Council's sewer.

Water.—There is every prospect of obtaining a supply of water for the institution from the Rhyl Urban District Council.

Lighting.—The building will be lighted by electricity generated from th boiler house in the laundry block.

Cottages will be provided for the engineers, gardeners, porters, and workshop instructors, of types similar to the Corporation Housing Schemes. These wil be placed near the junction of the Hospital road and the main road to Abergele

Materials.—The site is mainly composed of rock, and it is proposed to crush the stone obtained from the levelling of the ground, roadmaking, and excavation for buildings, and to use same for reinforced concrete for floors foundations, and stanchions, and concrete blocks for the walls, the roofs being covered with slates.

The City Architect estimates the cost of carrying out the work as regards **546 beds,** based on cubical contents, as follows :—

				£	s.	d
Laundry Block	280,763 cu. ft. at	1/-	..	14,038	3	0
Isolation Block A	23,378	,,	1/2 ..	79,198	7	0
,, B	26,634					
Admission Ward	58,963					
Two Juvenile Pavilions	89,148					
Hospital Wards	641,085					
Covered Corridor	65,360					
Administrative Block	399,055					
Mortuary	13,703					
Lodge	19,300					
Ducts	21,060					
	1,357,686					
Extra only for Ducts inside Buildings	37,268	,,	7d. ..	1,086	19	8
Sisters' Home	91,456	,,	1/7 ..	43,966	15	10
Nurses' Home	289,493					
Maids' Home	99,940					
School Teachers' Home	74,481					
	555,370					
Proposed School	82,240	,,	1/2 ..	4,797	6	8
Area below Ground Floor	393,555	,,	1/- ..	19,677	15	0
Six Porters' Cottages				4,500	0	0
Four Instructors' Cottages				3,000	0	0
Bridge				12,500	0	0
Sewage				6,000	0	0
Roads and Laying-out				6,000	0	0
Engineering				17,850	0	0
Water				7,000	0	0
Pump House				250	0	0
Weigh Machine Pit and Weighbridge				300	0	0
Chimney				500	0	0
				220,665	7	2
Contingencies				4,334	12	10
				£225,000	0	0

HENRY PRICE,
City Architect.

The Hospitals Sub-Committee,
21st November, 1924.

The City Architect estimates the cost of carrying out the work as regards **210 beds,** based on cubical contents, as follows :—

			£
Laundry Block	197,800	cubic feet at 1/- ..	9,890
Isolation Block	25,313		
Admission Block	31,350		
Two Juvenile Pavilions ..	92,350		
Two Hospital Pavilions ..	208,870		
Covered Corridor	40,600		
Administrative Block	342,420	,, at 1/2 ..	45,364
Mortuary	11,650		
Lodge	15,940		
Ducts	9,180		
	777,673		
Sisters', Nurses', and Maids' Home	311,913	,, at 1/9 ..	27,292
Proposed School	47,050	,, at 1/2 ..	2,745
Area below ground floor ..	296,441	,, at 1/- ..	14,822
Four Porters' Cottages			3,000
Two Instructors' Cottages			1,500
Bridge			12,500
Sewage			5,750
Roads and laying out			6,000
Engineering			13,000
Water			4,665
Pump House..			250
			146,778
Contingencies			3,222
			£150,000

HENRY PRICE,
City Architect.

The estimated cost of the erection and equipment of the necessary portion the hospital to accommodate **210 beds** and the subsequent maintenance arges may be stated as follows :—

		Capital Expenditure	Period	Annual Charges		
				Interest	Sinking Fund	Total
	£	£	Years	£	£	£
ildings, etc. ..	121,085					
Less Government Grant ..	37,800					
		83,285	30	4,164	1,751	5,915
ads		6,000	15	300	323	623
idge		12,500	20	625	465	1,090
werage		5,750	20	288	214	502
Vater Supply		4,665	15	233	251	484
tension of Farm—						
Land		1,500	50	75	13	88
Cottages, etc.		1,200	30	60	25	85
Farm Buildings		1,300	30	65	28	93
rniture and Equipment .. (See Appendix B.)		28,768	10	1,438	2,509	3,947
Totals		£144,968	—	£7,248	£5,579	£12,827

The gross estimated capital cost is £182,768, equal to £870 6s. 6d. per bed but from this figure must be deducted the sum of £180 per bed receivable fron the Government, which leaves the net estimated capital expenditure per be at £690 6s. 6d.

	£
The total debt charges (as shown above) are	12,82
*The annual maintenance charges at the rate of £2 10s. 0d. per bed per week amount to	27,30
The salaries of the teaching staff and provision of books, etc., are estimated at	2,00
Making a total charge of	42,12
From this sum must be deducted the Government Grant of 50 per cent.	21,06
Leaving a net charge on the rates of	£21,06

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* The figure of 50s. 0d. per bed per week can be looked upon as a real estimat of the maintenance charges in view of the fact that the Sanatorium cannot be going concern until at least two years hence.

The estimated cost of the erection and equipment of the full hospital to accommodate 546 beds and the subsequent maintenance charges may be state as follows :—

		Capital Expenditure	Period	Annual Charges		
				Interest	Sinking Fund	Total
	£	£	£	£	£	£
Buildings, etc. ..	193,500					
Less Government Grant ..	98,280					
		95,220	30	4,761	2,001	6,762
Roads		6,000	15	300	323	623
Bridge		12,500	20	625	465	1,090
Sewerage		6,000	20	300	223	523
Water Supply		7,000	15	350	376	726
Extension of Farm— Land		1,500	50	75	13	88
Cottages, etc.		1,200	30	60	25	85
Farm Buildings		1,300	30	65	28	93
Furniture and Equipment .. (See Appendix B.)		58,273	10	2,914	5,083	7,997
Totals		£188,993	—	£9,450	£8,537	£17,987

The gross estimated capital cost is £287,273, equal to £526 2s. 10d. per bed but from this figure must be deducted the sum of £180 per bed receivable fron the Government, which leaves the net estimated capital expenditure per be at £346 2s. 10d.

	£
The annual debt charges (as above) amount to	17,987
The annual maintenance charges at the rate of £2 10s. 0d. per bed per week amount to	70,980
The salaries of the teaching staff and provision of books, etc.. are estimated at	6,000
Making a total charge of	94,967
From this sum must be deducted the Government Grant of 50 per cent.	47,483
Leaving a net charge on the rates of	£47,484

The present weekly cost at Abergele is £2 10s. 3d. per bed and of Baguley £2 5s. 0d. (excluding loan charges).

The figure £2 10s. 0d. is more than Baguley, but until after the initial stages of filling the Sanatorium the charges of necessity will be a little higher than would subsequently be the case.

In the financial statement above given the Government Grant towards the Capital Expenditure of £180 per bed has been included, as this is the figure promised by the Government when the full scheme was sent up to them for approval in 1920.

It is to be realised, however, that the conditions attaching to such Grant at that time were that the plans, etc., for such scheme should be submitted before the 31st December, 1920. It was, however, the Ministry itself which recommended delay of this scheme until costs should have come down somewhat, and a reasonable claim, therefore, might be made that the Treasury should make at least not less than the Capital Grant which at that time was promised. It is believed that the Ministry will agree to this.

Appendices are attached showing the number of staff required and the estimated cost of equipment.

The plans have received the most careful consideration by the Medical Officer of Health, the City Architect, the Senior Tuberculosis Officer, and the Medical Superintendent of Abergele Sanatorium.

The plans have also been discussed at the Ministry of Health unofficially, and have been in that manner approved by the Medical Officers there.

The provision of such accommodation is long overdue in Manchester, as the existing beds available for the treatment of tuberculosis in children in General Hospitals and otherwise is totally inadequate to meet the demand, either in numbers or in the nature of treatment possible at these Institutions. The Public Health Committee therefore desires to express its very strong opinion that this scheme should be carried through at the earliest possible date.

On behalf of the Public Health Committee,

W. T. Jackson,

Chairman.

December 19th, 1924.

APPENDIX A.

Circular 34.

County and Borough Councils (England).

Ministry of Health,
Whitehall, S.W. 1,
3rd November, 1919.

TREATMENT OF TUBERCULOSIS.

Sir,

1. I am directed by the Minister of Health to state that he has been in communication with the Treasury on the question of the financial assistance which is afforded by the Imperial Exchequer for the provision of sanatoria and hospitals for the treatment of persons suffering from tuberculosis.

2. As the Council are aware, progress with the provision of residential accommodation for the treatment of this disease was practically suspended during the war, with the result that there is urgent need for a large addition to the amount of accommodation at present available. The Inter-Departmental Committee on Tuberculosis (Sanatoria for Soldiers), which was appointed in April last by the Minister of Health and the Minister of Pensions, has reported that the number of beds at present available for the treatment both of the ex-service man and of the civilian adult male population is most seriously inadequate and should be increased immediately.

3. With a view to meeting the recommendations of the Committee and to securing the expeditious provision of new suitable accommodation, the Treasury have agreed that capital grants in aid of the provision of additional sanatorium and hospital accommodation for the treatment of tuberculosis shall in future be made at the rate of £180 per bed, subject to a maximum grant of three-fifths of the total cost, on the following conditions :—

(1) That the providing authority submit their proposals, including the necessary plans and particulars, to the Ministry at the earliest possible date, and in no case later than the 30th June, 1920 ; and

(2) That the providing authority complete the works at the earliest possible date, and in no case later than two-and-a-half years from the date of the Ministry's approval of the proposals, unless the Ministry, with the concurrence of the Treasury, allow an extension of time. Such extensions will only be allowed in special circumstances beyond the control of the Local Authority.

4. The annual grant of 50 per cent. of the net deficit on the Council's tuberculosis maintenance account will be available in aid of the annual charges for interest on and repayment of loans raised to defray the balance of the capital cost of providing additional accommodation, but it will be understood that both the capital grant and the annual grant in aid of loan charges will only be paid in respect of expenditure approved by the Ministry.

5. I am to urge the Council to take this matter into consideration forthwith in order that their proposals may be submitted to the Ministry if possible before Christmas next. In cases where new institutions are required it will be necessary in the first instance to select a suitable site and obtain the approval of the Ministry thereto as a preliminary to compliance with the condition (1) specified in paragraph 3 above, and in those cases in which sites have already been secured with the approval of the Ministry, or of the Local Government Board, the necessary plans and particulars of the buildings proposed to be erected should be prepared and submitted to the Ministry at a very early date. Where plans of new institutions or of extensions to existing institutions have already been prepared and have been submitted to, or approved by, the Ministry or the Local Government Board, the Council should at once intimate whether they propose to proceed with their proposals with or without modifications.

With regard to the payment of capital grants, I am to state that the Ministry propose to adopt the procedure indicated in section 7 of the Circular Letter issued by the Local Government Board on the 7th November, 1913.

6. In deciding as to the choice of building materials, the Council should be guided to some extent by local conditions, but in every case the materials selected should be those which can be provided most economically and expeditiously. In any case in which difficulty is experienced in securing a supply of building materials, the Council should communicate with the Director of Building Materials Supply, Ministry of Munitions, Caxton House, Tothill Street, London, S.W. 1, and should forward a copy of their communication to the Ministry of Health.

7. I am to add that the Minister proposes shortly to issue a further Circular Letter in regard to certain of the other recommendations contained in the Report of the Inter-Departmental Committee referred to above.

I am, Sir,
Your obedient Servant,
ROBERT L. MORANT,
Secretary.

The Clerk of the Council,
or
The Town Clerk.

Circular 73.

County and County Borough Councils (England).

Ministry of Health,
Whitehall, S.W. 1,
9th March, 1920.

Sir,

TREATMENT OF TUBERCULOSIS.

I am directed by the Minister of Health to refer to Circular 34 addressed to the Councils of Counties and County Boroughs on the 3rd November last, in which attention was drawn to the urgent need for the provision of further residential accommodation for the treatment of tuberculosis.

The Minister desires to remind all Councils who have not yet submitted to the Ministry proposals for the provision of accommodation under the terms of the Circular, or who have submitted a part only of the proposals which they have in view, of the first condition to which the capital grants announced in Circular 34 are subject, viz. : that the proposals, including the necessary plans and particulars, be submitted to the Ministry at the earliest possible date, *and in no case later than the 30th June,* 1920.

In view of this condition, it is urgently necessary, in order that full advantage may be taken throughout the country of the new grant, that all Councils which have not yet formulated their proposals for the provision of additional accommodation should do so and proceed with the preparation of the necessary plans and particulars for submission to the Ministry without delay ; whilst, in cases where the preparation of plans, etc., is already in train, all practicable steps should be taken to expedite their completion and submission to the Ministry.

I am to add that, in the experience of the Ministry, the existing provision in the country generally for the treatment in residential institutions of non-pulmonary tuberculosis is especially deficient ; and I am accordingly to draw the attention of Councils to the importance of at once formulating proposals for the provision of institutions for the treatment of this form of tuberculosis. As was, however, indicated (in relation to the treatment of children) in section 3 of the Local Government Board's Circular of the 29th April, 1915, entitled "Treatment of Tuberculosis," the treatment of non-pulmonary tuberculosis, especially tuberculosis of the bones and joints, requires the provision of expensive apparatus and the employment of skilled surgeons ; and, except where a Council is likely to require at least 100 beds for the use of its own area, it will ordinarily be desirable, in the interests of economy, for residential provision of this kind to be undertaken jointly by two or more Councils. Where adequate provision for the residential treatment of non-pulmonary tuberculosis does not exist, and the population of the Council's area is not so large as to require the provision of an institution of 100 beds or more for this purpose, the Council should without delay take steps to confer with neighbouring Councils with a view to the submission of proposals for the establishment of a joint institution of this kind before the 30th June next.

I am, Sir,

Your obedient Servant,

A. K. Maclachlan,

Assistant Secretary.

Circular 103.

County and County Borough Councils (England).

Ministry of Health,
Whitehall. S.W. 1,
23rd June, 1920.

Sir,

TREATMENT OF TUBERCULOSIS.

I am directed by the Minister of Health to refer to the circular letters addressed to the Councils of Counties and County Boroughs on the 3rd November last (Circular 34) and the 9th March last (Circular 73), relative to the provision of further residential accommodation for the treatment of tuberculosis.

I am to state, for the information of the Council, that the Ministry have obtained the assent of the Treasury to certain modifications of the condition set out in paragraph 3 (1) of the Circular Letter of the 3rd November last, and that capital grants at the rate of £180 per bed, or three-fifths of the total cost, whichever is less, will be available in aid of the provision of additional sanatorium and hospital accommodation for the treatment of tuberculosis if the providing authority submit their proposals, including the necessary plans and particulars, to the Ministry (*a*) in the case of an institution for the treatment of pulmonary tuberculosis not later than the 31st October, 1920, and (*b*) in the case of an institution for the treatment of non-pulmonary tuberculosis not later than the 31st December, 1920, if the institution is to be provided by a single council, or not later than the 31st March, 1921, if the institution is to be provided by a combination of councils. The condition laid down in paragraph 3 (2) of the Circular Letter of the 3rd November last, as to the period for the completion of the works, will apply in all cases.

It will be understood that the extensions of time now granted are final, and that no capital grants will be paid towards the cost of schemes for the provision of residential accommodation for the treatment of tuberculosis unless the required plans and particulars are submitted to the Ministry before the expiry of the specified period.

I am, Sir,

Your obedient Servant,

A. K. Maclachan,

Assistant Secretary.

The Town Clerk,
Manchester.

APPENDIX B.

PROPOSED CHILDREN'S HOSPITAL AT ABERGELE.

Estimated Cost of Furniture and Equipment.

	210 Bed Scheme			546 Bed Scheme		
	£	s.	d.	£	s.	d.
Wards	9,639	2	6	22,828	19	10
Staff Quarters	7,191	8	8	14,394	14	9
Kitchens, Dining Rooms, etc.	1,190	11	2	2,125	13	6
General	2,146	18	4	4,947	7	0
Doctors' Quarters	555	19	2	1,149	18	10
School, Lecture Room, etc.	990	0	0	1,890	0	0
Offices, Committee Room, etc.	814	0	0	1,109	14	0
Operating Theatre, Dispensary, etc.	1,748	15	0	1,841	0	9
Sisters' Duty Room	211	10	0	670	0	0
Matrons' Quarters	435	17	4	672	17	1
Principal Medical Officer's Quarters	917	0	0	942	10	0
Isolation Wards	248	18	0	298	10	6
Visitors' Rooms	31	0	0	67	5	0
Porters' Office, etc.	20	10	0	26	0	0
Mortuary	11	3	0	11	3	0
Total	26,152	13	2	52,975	14	3
Contingencies—10 per cent. ..	2,615	5	4	5,297	11	5
Grand Total	£28,767	18	6	£58,273	5	8

APPENDIX C.

PROPOSED CHILDREN'S HOSPITAL AT ABERGELE.

The following is a list of the staff required :—

	210 Bed Scheme	546 Bed Scheme
Doctors	2	4
Matron	1	1
Steward	1	1
First Assistant Matron	1	1
Second Assistant Matron	—	1
Home Sister	1	1
Night Sister	1	1
Sisters	7	12
Staff Nurses	12	27
Probationers	35	74
Cook	1	1
Assistant Cooks	1	2
Kitchen Maids	2	4
Scullery Maids	4	6
Serving Maids	2	2
Doctor's Housemaids	2	2
Wardmaids	12	20
Waitresses, Nurses' Home	2	4
Housemaids, Nurses' Home	4	8
Housemaids, Sisters' Home	—	4
Laundresses	8	15
Porters	3	7
Gardeners, Assistant	1	2
Engineers, Assistant	2	2
Stokers	2	2
Instructors	2	4
Teachers	8	24
Seamstresses	2	5
	119	237

2.—REPORT OF THE FINANCE COMMITTEE.

1. As required by Standing Order 69 (10), the Finance Committee present to the Council the foregoing report of the Public Health Committee as to an application for borrowing powers.

2. On the 1st December, 1920, the City Council approved a scheme for accommodating 500 children, and application was made to the Ministry of Health for borrowing powers amounting to £458,751, such figure being based on a capital expenditure of £548,751, equal to £1,097 per bed, less the capital grant by the Government of £180 per bed, a net cost per bed of £917.

3. After some delay the Ministry of Health issued a circular letter intimating that the Treasury were not prepared to sanction grants until more normal conditions prevailed ; consequently the scheme has not been proceeded with.

4. A Circular dated the 8th February, 1924, has now been issued by the Ministry of Health referring to previous circulars relating to grant-aided public health services, and intimating that they have decided to revert generally to the position which previously existed.

5. The Public Health Committee forward a scheme to provide accommodation for 546 beds at a capital cost of £287,273, from which must be deducted a Capital Grant on the basis of £180 per bed, being the figure promised by the Government on the full scheme, leaving a net amount to be borrowed of £188,993, a cost per bed of £346 2s. 10d. as against the estimate in 1920 of £917 per bed.

6. The Public Health Committee propose, however, that only accommodation should be provided at once for 210 beds, the increase to the full quota to be proceeded with in the future as circumstances warrant. Much of the work contemplated in the full scheme must also be carried out in the partial scheme, and with this in mind the cost of the provision of the 210 beds is estimated at £182,768, from which must be deducted the Government grant of £180 per bed, leaving a net capital expenditure of £144,968, equal to an outlay of £690 6s. 6d. per bed.

7. The annual charges for interest and sinking fund and the maintenance charges for the 210 bed scheme, and also the full scheme, are set out in detail in the report of the Public Health Committee.

8. The following statement shows the comparative annual cost of the partial and full schemes:—

	210 Bed Scheme	546 Bed Scheme
1. Gross capital expenditure	£ 182,768	£ 287,273
2. *Deduct* Government grant of £180 per bed ..	37,800	98,280
3. Net capital expenditure	144,968	188,993
4. Cost per bed	690	346
Revenue Expenditure—		
5. I.—Debt charges	12,827	17,987
6. II.—Maintenance	27,300	70,980
7. III.—Salaries of Teaching Staff, etc. ..	2,000	6,000
8. Total charge	42,127	94,967
9. *Less* Government grant of 50 per cent. ..	21,063	47,483
10. Net charge on rates	21,064	47,484
11. Pence in the £ on rates	pence ·815	pence 1·837

9. The Finance Committee are satisfied as to the necessity for providing the hospital accommodation, and raise no objection on financial grounds to the proposal to provide at once 210 beds on condition that the Government pay a capital grant of £180 per bed in respect of the 210 bed scheme, and that the Corporation receive an assurance that a grant of not less than that sum will be given if and when the larger scheme is proceeded with. They are of opinion, however, that before any further extension of the scheme is put into operation the Council should have before them a further report as to the experience gained as a result of the present proposal and the necessity for any further extension.

On behalf of the Finance Committee,

H. J. GOLDSCHMIDT,

Chairman.

Town Hall, Manchester,
December 23rd, 1923.

MONSALL HOSPITAL.

REPORT FOR 1923-24.

BY DR. D. SAGE SUTHERLAND, MEDICAL SUPERINTENDENT.

The total number of patients admitted was 5,549.

The average daily number of patients was 364·5.

The fatality rate in all cases was 5·84 per cent., as against 5·1 per cent. in 1922.

SCARLET FEVER.

The number of patients admitted was 2,847. The discharges were 2,881, and the fatalities were 56, giving a death-rate of 1·9 per cent.

DIPHTHERIA.

The number of patients admitted was 894. The discharges were 775. Seventy-six deaths occurred, giving a fatality rate of 8·93 per cent. as against 10·1 per cent. in 1922. Tracheotomy was performed in 26 cases, of whom 17 died, giving a mortality rate of 65·38 per cent. as against 59·1 per cent. in 1922.

ENTERIC FEVER.

The number of patients admitted was 105. The discharges were 86. Nine patients died, giving a fatality rate of 9·47 per cent.

ERYSIPELAS.

There were 255 cases admitted and 243 discharged. Eleven patients died, giving a mortality rate of 8·3 per cent. as against 7·2 per cent. in 1922.

PUERPERAL FEVER.

There were 189 admissions and 161 discharges. Twenty-five deaths occurred, giving a fatality rate of 13·4 per cent. In 90 instances the infant was admitted with mother.

OTHER DISEASES

1,259 cases were admitted and 1,163 discharged. 136 deaths occurred, giving a death-rate of 10·4 per cent. as against 11·6 per cent. in 1922.

In this category are included cases of measles, whooping cough, chickenpox, mumps, cerebro-spinal fever, encephalitis lethargica, patients incorrectly diagnosed, and infants admitted with mother.

LABORATORY REPORT.

Cultures from throat, nose, and ear		16,390
,, vagina		9
,, uterus		18
Widal reactions—B. Typhosus	}	243
,, Para. A		
,, Para. B		
Typhoid stools		186
,, urine		164
Examination of spinal fluid		70
,, pus		12
,, sputum		68
Smears from throat		208
Blood films		15
Urine, bacilluria, nephritis		57
Various fluids		6
Total		17,446

Of cultures from nose, throat, and ear, the following were positive for diphtheria bacilli :—

Throat	739
Nose	697
Ear	147
Total	1,583

Twenty-one nurses contracted scarlet fever.

Eight nurses contracted diphtheria.

Four nurses contracted measles.

Two nurses contracted enteric fever.

Six hundred and sixty-three applications were received for probationerships, of which 159 were accepted.

Thirty-four applications were received for the post of ward sister, of which 10 were accepted.

Forty-one nurses completed their training, 27 of whom proceeded to general hospitals. Forty nurses left before the completion of training.

TABLES FOR 1923.

TABLE SHOWING NUMBERS OF VARIOUS DISEASES TREATED, 1923.

DISEASE	Remaining in Hospital, Jan. 1st, 1923	Admitted	Discharges and Deaths	Remaining in Hospital, Dec. 31st, 1923
Scarlatina	291	1441	1604	128
Diphtheria	125	439	470	94
Enteric Fever...............	6	34	32	8
Erysipelas	15	142	139	18
Puerperal Fever............	8	91	84	15
Other Diseases	31	429	426	34
Total...............	476	2576	2755	297

COMPLICATIONS IN SCARLET FEVER.

Complication	Number	Percentage
Rhinorrhœa in Convalescence..	145	9·04
Otorrhœa	157	9·7
Nephritis	25	1·5
Albuminuria of Convalescence..	203	12·6
Adenitis and Abscess	5	0·31
Endocarditis	9	0·56

DIPHTHERIA.

AGE OF PATIENTS	MALE			FEMALE			TOTAL		
	Cases	Died	Mortality per cent.	Cases	Died	Mortality percent.	Cases	Died	Mortality per cent.
Under 1 year ...	4	1		1	1		5	2	
1 to 2 years ...	8	1		12	...		20	1	
2 ,, 3 ,, ...	16	2		17	3		33	5	
3 ,, 4 ,, ...	22	1		25	2		47	3	
4 ,, 5 ,, ...	28	3		22	2		50	5	
5 ,, 10 ,, ...	89	4		88	7		177	11	
10 ,, 15 ,, ...	37	2		48	3		85	5	
15 ,, 20 ,, ..	9	...		17	...		26	...	
20 ,, 25 ,, ...	4	...		6	...		10	...	
25 ,, 30 ,, ...	1	...		2	...		3	...	
30 and over ...	4	1		10	...		14	1	
Total	222	15	6·7	248	18	7·2	470	33	7·02

14 deaths occurred within 48 hours of admission.
Of the deaths, 1 was complicated by other co-existent diseases.

TRACHEOTOMY CASES.

AGE OF PATIENTS	NO. OF PATIENTS	DIED	MORTALITY PER CENT.
Under 1 year	...	...	...
1 to 2 years	1	1	100·0
2 ,, 3 ,, ...	3	2	66·6
3 ,, 4 ,, ...	1	1	100·0
4 ,, 5 ,, ...	3	2	66·6
5 ,, 10 ,, ...	4	2	50·0
10 ,, 15 ,, ...	...	...	...
15 and over	...	...	...
Total	12	7	58·3

Of the deaths, 6 occurred within 48 hours of admission.

ENTERIC FEVER.

TABLE SHOWING INTERVAL ELAPSING BETWEEN DATE WHEN PATIENT WAS FIRST SEEN BY A MEDICAL MAN AND THE DATE OF ADMISSION TO HOSPITAL; ALSO SHOWING DAY OF DISEASE ON ADMISSION.

DAYS' INTERVAL	Interval between admission and date when Patient was first seen by a Medical Attendant		Day of disease on admission	Day of disease on admission	
	All Cases	Deaths		All Cases	Deaths
Sent in on same day..	1	...	1st day	...	...
1 day interval ..	2	1	2nd ,, ...	1	...
2 days' ,, ...	2	...	3rd ,, ...	...	...
3 ,, ,, ...	3	...	4th ,, ...	1	...
4 ,, ,, ...	2	...	5th ,, ...	...	...
5 ,, ,, ...	1	...	6th ,, ...	2	...
6 ,, ,, ..	4	...	7th ,, ...	7	1
7 ,, ,, ...	3	...	2nd week	13	...
8 ,, ,, ...	3	...	3rd ,, ...	3	...
9 ,, ,, ...	3	...	4th ,, ...	4	...
10 ,, ,, ...	1	...	5th ,, ...	1	...
Over 10 days' interval	7	...	Over 5th week ...	...	...
Totals	32	1		32	1

TABLES for 1924.

TABLE SHOWING NUMBERS OF VARIOUS DISEASES TREATED, 1924.

DISEASE	Remaining in Hospital, Jan. 1st, 1924	Admitted	Discharges and Deaths	Remaining in Hospital, Dec. 31st, 1924
Scarlatina	128	1,406	1,309	225
Diphtheria	94	455	381	168
Enteric Fever	8	71	63	16
Erysipelas	18	113	115	16
Puerperal Fever	15	98	95	18
Other Diseases	34	830	826	38
Total	297	2,973	2,789	481

COMPLICATIONS IN SCARLET FEVER.

Complication	Number	Percentage
Rhinorrhœa in Convalescence ..	27	2·11
Otorrhœa	106	8·3
Nephritis	24	1·88
Albuminuria of Convalescence .	77	6·02
Adenitis and Abscess	2	0·15
Endocarditis	7	0·54

DIPHTHERIA.

AGE OF PATIENTS	MALE			FEMALE			TOTAL		
	Cases	Died	Mortality per cent.	Cases	Died	Mortality per cent.	Cases	Died	Mortality per cent.
Under 1 year	3	2		1	1		4	3	
1 to 2 years.. ..	6	2		4	1		10	3	
2 ,, 3 ,, ...	8	1		11	4		19	5	
3 ,, 4 ,, ...	25	4		25	1		50	5	
4 ,, 5 ,, ...	19	2		19	4		38	6	
5 ,, 10 ,, ...	72	9		69	5		141	14	
10 ,, 15 ,, ...	30	2		34	4		64	6	
15 ,, 20 ,, ...	14	..		11	1		25	1	
20 ,, 25 ,, ...	5	..		6	..		11	..	
25 ,, 30 ,, ...	3	..		3	..		6	..	
30 and over	2	..		11	..		13	..	
Total	187	22	11·7	194	21	10·8	381	43	11·28

21 deaths occurred within 48 hours of admission.
Of the deaths, 7 were complicated by other co-existent diseases.

TRACHEOTOMY CASES.

AGE OF PATIENTS	NO. OF PATIENTS	DIED	MORTALITY PER CENT.
Under 1 year	1	1	100·0
1 to 2 years	2	2	100·0
2 ,, 3 ,, ...	3	2	66·6
3 ,, 4 ,, ...	5	2	40·0
4 ,, 5 ,, ...	2	1	50·0
5 ,, 10 ,, ...	2	2	100·0
10 ,, 15 ,, ...	..	..	..
15 and over	..	..	..
Total	15	10	66·6

Of the deaths, 8 occurred within 48 hours of admission.

ENTERIC FEVER.

TABLE SHOWING INTERVAL ELAPSING BETWEEN DATE WHEN PATIENT WAS FIRST SEEN BY A MEDICAL MAN AND THE DATE OF ADMISSION TO HOSPITAL; ALSO SHOWING DAY OF DISEASE ON ADMISSION.

DAYS' INTERVAL	Interval between admission and date when Patient was first seen by a Medical Attendant		Day of disease on admission	Day of disease on admission	
	All Cases	Deaths		All Cases	Deaths
Sent in on same day ..	..	..	1st day	..	..
1 day interval	2	..	2nd ,, ...	1	..
2 days' ,, ..	5	1	3rd ,, ...	5	..
3 ,, ,, ..	7	1	4th ,, ...	6	1
4 ,, ,, ..	12	2	5th ,, ...	5	1
5 ,, ,, ..	6	..	6th ,, ...	2	..
6 ,, ,, ..	4	1	7th ,, ...	2	..
7 ,, ,, ..	4	1	2nd week	24	4
8 ,, ,, ..	3	1	3rd ,, ...	8	1
9 ,, ,, ..	5	..	4th ,, ...	8	1
10 ,, ,, ..	10	1	5th ,, ...	2	..
Over 10 days' interval..	5	..	Over 5th week ..	..	..
Total	63	8	....	63	8

VETERINARY AND MILK CONTROL DEPARTMENT.

By Lieut.-Col. J. W. Brittlebank, C.M.G., M.R.C.V.S., D.V.S.M. (Vict.).

The work for the years 1923-24 is briefly summarised in the attached tables, and the more prominent features present themselves readily.

The work done under the Manchester Milk Clauses again shows that a high percentage of the milk sent into the City from the country contains live tubercle bacilli. It is, however, only just to all concerned again to point out that, just as in previous years, supervision has been specially directed to those sources of supply from areas which we, from our records and personal observation, know to present the highest degree of risk. The figures for 1924 show a fall in the amount of tuberculous milk, and as the work of this year covers a wider field than for 1923, there is some encouragement to hope that real improvement is taking place.

It is gratifying to report that there is now material evidence to show that much of the milk sent in is cleaner than it was, but it by no means reaches a standard where any special commendation can be handed out to the producers. Progress, however small, is gratifying, and must be placed on record. In this direction the work done under the Cheshire County Council calls for special comment, and is worthy of imitation by other similar bodies. The Lancashire Milk Recording Society have also done splendid work.

The delivery of milk in sterilised bottles continues to grow, though not quite as fast as one would wish. Unfortunately, as is usual in all progressive movements, the less scrupulous section of the trade have taken advantage of the general impression prevailing among the public that all milk sold in bottles must of necessity be better than milk sold loose. Many of these persons have no conveniences for properly sterilising bottles. The public are therefore again advised to make full enquiries before being satisfied.

The pasteurisation of milk is becoming very general. Many excellent plants for the purpose have been installed in Manchester, and great credit is due to the holders of licences for the very excellent manner in which they are doing their work, and I am very pleased to have an opportunity of putting on record my high appreciation of the way in which many firms have responded.

The production of Grade "A" milk is growing slowly, and no doubt this slowness of growth is due to some extent to the confusion of mind existing among the public, who are confronted with so many different grades of milk.

The position with regard to ice cream is the least satisfactory feature of our operations. I have reported at some length in previous years on this branch of the work, and there is nothing new to add. There is no doubt that compulsory registration of all premises and persons, concerned with the manufacture and distribution of ice cream, is urgently called for.

The number of enquiries received in the Department from the general public is increasing steadily, and there is every indication that greater care is being taken by individuals in securing a safe and clean milk supply into their homes. A keenly stimulated interest in this question on the part of consumers is all that is required to secure rapid and widespread improvement in every aspect of this important question.

The administration of the Milk and Dairies (Amendment) Act, 1922, is proceeding smoothly, but so far has been limited principally to the supervision of milkshops under the powers conferred under Section 2 of the Act.

It is sufficient to state that there is a marked improvement in the general condition of the City milkshops, and I have received much assistance from Mr. Shenton, secretary, and other members of the Committee of the Manchester and Salford Milk Dealers' Association.

Finally, I am deeply indebted to Mr. Heaton, my clerk, for the indefatigible manner in which he has carried out his onerous duties. The inspectors responsible for the inspection of milkshops have also carried out their duties in an admirable manner.

MANCHESTER MILK CLAUSES.

Table I.

City Farms.	1923	1924
Total number of farms in City	76	76
Number of visits paid to City farms by Veterinary Surgeon.	240	198
,, cowsheds inspected	399	491
,, cows examined	3,713	4,917
,, cows found with tuberculous udders	3	—
Country Farms.		
Number of visits paid to country farms by Veterinary Surgeon	128	164
,, cowsheds inspected	387	450
,, cows examined	3,414	4,472
,, cows found with tuberculous udders	18	26
Number of samples taken from farms by Veterinary surgeon	47	56
,, positive results of examination of farm samples.	14	26
,, cows slaughtered under supervision of Veterinary Surgeon	19	24

TABLE II.

MILK SAMPLES.

	1923	1924
Total number of samples taken for bacteriological examination	467	590
Collected by Food and Drugs Inspectors at:—		
(*a*) Railway Stations	309	515
(*b*) Vehicles entering the City by road	15	42
Collected by Milk shops Inspectors at:—		
(*a*) Day Nurseries and Hospitals	122	15
(*b*) City Dairies	21	18
Number of samples found to cause tuberculosis	*34	†48

* This figure includes 1 control sample.
† This figure includes 5 control samples.

County		No. of Farmers represented by Samples of Milk	No. of Farmers sending Tuberculous Milk	Percentage
Cheshire	1923	170	22	12·94
	1924	250	27	10·80
Derbyshire	1923	56	4	7·14
	1924	92	8	8·69
Lancashire	1923	41	4	9·75
	1924	39	2	5·12
Staffordshire	1923	29	3	10·34
	1924	68	6	8·82
Yorkshire	1923	..	..	..
	1924	4	..	..
Total	1923	296	33	11·14
	1924	453	43	9·49

TABLE III.

ICE CREAM.

	1923	1924
Number of persons on register—December 31st	528	535
,, visits by Inspectors	827	318
,, premises found dirty	37	22
,, premises where boiled mixture was found uncovered	7	7
,, premises in disrepair	29	12
,, defective ashbins	7	—
,, applications to manufacture ice cream refused.	38	24
,, persons warned for dirty clothing	10	7
,, persons warned for dirty water-closets	1	..

TABLE IV.

MILK AND DAIRIES (AMENDMENT) ACT, 1922.

	1923	1924
Number of registered milkshops—December 31st	2,221	2,176
,, visits to milkshops by Inspectors (including District Inspectors)	21,043	14,266
Total number of applications for registration	637	623
Number of applications approved by Committee	208	277
,, applications refused by Committee	162	204
,, applications withdrawn before consideration by Committee	267	142
,, persons found selling milk unregistered	124	64
,, milkshops found without indicator over door	18	3
,, milk vessels uncovered	15	4
,, milkshops found dirty	33	8
,, premises in disrepair	11	7
Prosecutions against unregistered milk sellers	—	13
Appeals to Court of Summary Jurisdiction against decision of Local Authority	—	3

TABLE V.

MILK (SPECIAL DESIGNATIONS) ORDER, 1923.

Number of Licences issued during the years 1923 and 1924.

	1923	1924
oducer's licence to use the designation "Grade A" ..	1	1
ealer's licence to use the designation "Certified".. ..	2	2
ealer's licence to sell milk as "Grade A"	—	1
ealer's licence to use the designation "Pasteurised"—		
(*a*) Pasteurising establishments	5	7
(*b*) Shops	1	1

e table completed to date from 1901 is inserted.

TABLE VI.

	Number of Farmers' Milk tested during the year	Total number found to cause Tuberculosis in the experimental animal	Percentage of Farmers sending Tuberculous Milk	Percentage of Farmers from EACH COUNTY whose Milk was found to cause Tuberculosis						
				Cheshire	Derbyshire	Staffordshire	Shropshire	Lancashire	Yorkshire	Manchester
1	272	27	9·90	10·46	9·23	8·00	10·00	...	...	...
2	345	36	10·40	12·72	8·65	4·01	...	8·31	...	...
3	329	45	13·60	14·76	9·58	15·15	40·00	...	...	...
4	318	29	9·10	11·17	6·02	...	...	7·14	25·00	...
5	565	47	8·30	10·26	6·00	6·38	...	2·98	12·50	...
6	542	42	7·70	8·60	6·50	9·30	12·50	4·00	...	...
7	562	38	6·76	7·71	4·48	6·94	12·50	3·70	...	...
8	289	27	9·34	11·56	6·25	7·70	...	2·94	12·50	...
9	535	31	5·79	4·80	7·47	8·57	11·11	3·33	...	...
0	468	30	6·41	6·20	8·69	5·55	...	...	...	...
1	494	51	10·32	11·11	2·5	12·12	10·00	12·20	50·00	...
2	484	54	11·15	12·94	4·00	10·20	33·33	6·00	10·00	...
3	486	60	12·51	13·99	11·58	9·26	33·33	5·88	20·00	...
4	352	34	9·66	12·39	8·19	...	...	2·77	...	...
5	69	9	13·04	16·21	...	...	...	13·63	...	...
6	321	38	11·83	11·59	8·80	13·04	...	6·97	...	...
7	365	37	10·13	13·54	9·3	4·3	...	11·7	...	11·4
8	288	18	6·25	8·17	5·12	4·16	...	3·57	...	2·63
9	240	20	8·30	8·84	8·0	4·55	...	8·1	...	11·1
0	194	29	14·94	18·75	10·71	...	...	5·88	...	...
1	305	37	12·13	16·23	4·17	...	...	10·52	...	...
2	243	21	8·64	10·52	6·34	6·66	...	3·57	...	...
3	296	33	11·14	12·94	7·14	10·34	...	9·75	...	...
4	453	43	9·49	10·80	8·69	8·82	...	5·12	...	...
l..	8815	836	9·48	—	—	—	—	—	—	—

TABLE VII.—1923 AND 1924.

SOURCE OF SAMPLES				NUMBER OF SAMPLES				Number of Farms Inspected	Number of Cows Examined	COWS WITH TUBERCULOUS UDDERS		
				Primary and Subsequent	Control	Total	Positive Results			Found	Slaughtered under Supervision of a Vet. Surgeon	Removed from Farm
By Food and Drug Inspectors	Primary	Railway Stations ..	1923	296	13	309	*28	..	..	..	..	..
			1924	501	14	515	†42	..	..	..	..	..
		Carts and City Dairies	1923	13	2	15	2	..	..	..	..	..
			1924	41	1	42	4	..	..	..	..	..
By Milkshops Inspectors	Primary	Nurseries and Hospitals (Mixed) ..	1923	122	..	122	2	..	..	..	..	..
			1924	15	..	15	2	..	..	..	..	..
		Carts, City Farms, City Dairies.. ..	1923	20	1	21	2	..	..	..	..	..
			1924	18	..	18	..	..	..	..	..	..
By Veterinary Surgeon	Primary	Country Farms, Individual	1923	47	..	47	14	128	3,414	18	16	2
			1924	56	..	56	26	164	4,472	26	24	12
		City Farms, Individual..	1923	..	..	..	..	240	3,713	3	3	17
			1924	..	..	..	..	198	4,917	..	..	..
Totals			1923	498	16	514	48	368	7,127	21	19	19
			1924	631	15	646	74	362	9,389	26	24	12

* Includes 1 control sample found positive.

PNEUMONIA.

1923.

(1) Primary Pneumonia.

Of the 2,534 known primary pneumonia cases, 2,416 were fully investigated. f these, 875 cases were classified as lobar pneumonia, 1,203 cases as lobular eumonia, and 338 cases simply as pneumonia.

The case fatality among lobar pneumonia cases was 32·9 per cent., ·1 per cent. among lobular pneumonia cases, and 26·03 per cent. among e unclassified cases.

The Health Visitors paid 6,949 visits in connection with cases suffering om all forms of pneumonia.

(2) Influenzal Pneumonia.

Of the 470 cases of influenzal pneumonia which came to our notice, 460 cases ere fully investigated, and of these 260 were males and 200 females.

The case fatality was 35·8 per cent.

Influenza.

478 cases of influenza, other than influenzal pneumonia, came to the notice this department through the official death returns, the activities of the Health sitors, and a few by notification from medical practitioners. The greatest mber of cases occurred during March and April.

The case fatality was 27·6 per cent.

To get a clearer understanding of the effects of influenza, the 470 cases of fluenzal pneumonia may now be considered with the 478 cases of influenza. these, 460 cases of influenzal pneumonia and 478 cases of influenza were vestigated.

	Males	Females	Total
Cases	455	483	938
Deaths	136	161	297

This shows a case fatality of 31·6 per cent.

The Health Visitors paid 889 visits in respect of influenza.

(3) SECONDARY PNEUMONIA.

139 cases of secondary pneumonia were notified during the year, and wer associated with the following diseases :—

Measles	42	cases.	
Whooping Cough	94	,,	
Scarlet Fever	1	case.	
Diphtheria	1	,,	
Bronchitis	1	,,	(not investigated
	139		

The case fatality was 49·3 per cent.

With eight exceptions, the cases were among children under five years age.

These cases, being notified, were investigated, although they are *not* notifiabl under the Pneumonia, Malaria, and Dysentery Regulations of 1918.

PNEUMONIA.

1924.

(1) PRIMARY PNEUMONIA.

Of the 2,629 known primary pneumonia cases 2,515 were fully investigate and of these 1,050 cases were classified as lobar pneumonia, 1,358 cases a lobular pneumonia, and 107 cases simply as pneumonia.

The case fatality among lobar pneumonia cases was 30·4 per cent., 36· per cent. among lobular pneumonia cases, and 37·3 per cent. among th unclassified cases.

The Health Visitors paid 7,727 visits in connection with cases suffering fro all forms of pneumonia.

(2) INFLUENZAL PNEUMONIA.

Of the 496 cases of influenzal pneumonia which came to our notice 461 cas were fully investigated, and of these 232 were males and 229 females.

The case fatality was 42·7 per cent.

TABLE NO. 1.—SHOWING THE NUMBER OF PRIMARY, INFLUENZAL, AND SECONDARY PNEUMONIA CASES WHICH HAVE COME TO THE KNOWLEDGE OF THIS SECTION OF THE PUBLIC HEALTH DEPARTMENT DURING 1923.

THE TABLE ALSO SHOWS THE NUMBER OF NOTIFIED CASES, THE NUMBER OF CASES FULLY INVESTIGATED, AND THE TOTAL NUMBER OF KNOWN CASES.

		Notified Cases	Cases fully investigated		Cases not fully investigated		Total known Cases of Primary, Influenzal, and Secondary Pneumonia occurring in 1923	
(a) *Primary Pneumonia*—								
1. Number of primary pneumonia cases notified and fully investigated	1,970	2,067	1,970	2,416			2,534 (Primary)	3,143
2. Number of primary pneumonia cases notified and not fully investigated	97				97	118		
3. Number of primary pneumonia deaths not previously notified, but fully investigated ..	446		446					
4. Number of primary pneumonia deaths not previously notified, and not fully investigated	21				21			
(b) *Influenzal Pneumonia*—								
1. Number of influenzal pneumonia cases notified and fully investigated	419	426	419	460			470 (influenzal)	
2. Number of influenzal pneumonia cases notified and not fully investigated	7				7	10		
3. Number of influenzal pneumonia deaths not previously notified, but fully investigated ..	41		41					
4. Number of influenzal pneumonia deaths not previously notified and not fully investigated..	3				3			
(c) *Secondary Pneumonia*—								
1. Number of secondary pneumonia cases notified and fully investigated	130	131	130	138			139 (secondary)	
2. Number of secondary pneumonia cases notified and not fully investigated	1				1	1		
3. Number of secondary pneumonia deaths not previously notified, but fully investigated ..	8		8					
4. Number of secondary pneumonia deaths not previously notified, and not fully investigated	0				0			
	3,143	2,624		3,014		129		3,143

Table No. 1.—Showing the Number of Primary, Influenzal, and Secondary Pneumonia Cases which have come to the knowledge of this Section of the Public Health Department during 1924.

The Table also shows the Number of Notified Cases, the Number of Cases Fully Investigated, and the Total Number of Known Cases.

		Notified Cases	Cases fully investigated		Cases not fully investigated		Total known Cases of Primary, Influenzal, and Secondary Pneumonia occurring in 1924	
(a) *Primary Pneumonia*—								
1. Number of primary pneumonia cases notified and fully investigated	2,118	2,203	2,118	2,515			2,629 (Primary)	3,423
2. Number of primary pneumonia cases notified and not fully investigated	85				85	114		
3. Number of primary pneumonia deaths not previously notified, but fully investigated ..	397		397					
4. Number of primary pneumonia deaths not previously notified, and not fully investigated	29				29			
(b) *Influenzal Pneumonia*—								
1. Number of influenzal pneumonia cases notified and fully investigated	417	447	417	461			496 (influenzal)	
2. Number of influenzal pneumonia cases notified and not fully investigated	30				30	35		
3. Number of influenzal pneumonia deaths not previously notified, but fully investigated ..	44		44					
4. Number of influenzal pneumonia deaths not previously notified and not fully investigated ..	5				5			
(c) *Secondary Pneumonia*—								
1. Number of secondary pneumonia cases notified and fully investigated	289	289	289	298			298 (secondary)	
2. Number of secondary pneumonia cases notified and not fully investigated	0				0	0		
3. Number of secondary pneumonia deaths not previously notified, but fully investigated ..	9		9					
4. Number of secondary pneumonia deaths not previously notified, and not fully investigated	0				0			
	3,423	2,939		3,274		149		3,423

INFLUENZA.

356 cases of influenza other than influenzal pneumonia came to the notice of this department through the official death returns, the activities of the Health Visitors, and a few by notification from medical practitioners. The greatest number of cases occurred during February, March, and April, and 347 cases were investigated.

The case fatality was 36·5 per cent.

To get a clearer understanding of the effects of influenza the 496 cases of influenzal pneumonia may now be considered with the 356 cases of influenza. Of these, 461 cases of influenzal pneumonia and 347 cases of influenza were investigated.

	Males	Females	Total
Cases	393	415	808
Deaths	152	172	324

It should be noted that as influenza is not a notifiable disease, a large proportion of the cases have been brought to our notice by the death returns, with the result that there is in this series of investigated cases an undue proportion of fatal results.

The Health Visitors paid 713 visits in respect of influenza.

(3) SECONDARY PNEUMONIA.

298 cases of secondary pneumonia were notified during the year, and were associated with the following diseases :—

Measles	221	cases.
Whooping Cough	74	,,
Measles and Whooping Cough ..	1	,,
Diphtheria..	2	,,
	298	

The case fatality was 44·9 per cent.

With 32 exceptions the cases were among children under 5 years of age.

These cases being notified were investigated, although they are *not* notifiable under the Pneumonia, Malaria, and Dysentery Regulations of 1918.

STATEMENT OF WORK DONE BY THE HEALTH VISITORS.

By Miss Seed.

The staff at the end of the year 1923 consisted of a Superintendent, an Assistant Superintendent, 52 Health Visitors, a Cleansing Nurse, and 7 female Clerks, and remained unchanged until December, 1924, when the appointment of an additional Health Visitor was sanctioned by the Establishments Committee and the Ministry of Health, so that there are now 53 Health Visitors on the staff.

The main features of the Health Visitors' work, as in previous years, included the visitation of infants in their homes from the time the attendance of the midwife or doctor ceases until the completion of the child's fifth year ; the investigation of cases of measles, whooping cough, pneumonia, and influenza ; and the investigation and following up of cases of scabies and vermin.

As has been mentioned in former reports, several of the Health Visitors' districts are too large to allow of their work being effectual.

In visiting infant cases, the aim of the department is to visit children in the first year of life at least once a month (with an additional visit during the first two months), to visit children in their second year every other month, to visit children in their third year once every three months, to visit children in their fourth year once every four months, and to visit those in their fifth year twice in the year. This, of course, applies only to children who are progressing satisfactorily; additional visits are required to be paid to unsatisfactory cases.

In actual practice, however, it is not possible to carry out this theory very thoroughly, owing to the fact previously mentioned of the very large districts some of the Health Visitors are responsible for, and although each district is sub-divided into sections to ensure that the visits may be extended over it as evenly as possible, the length of time which must necessarily elapse in some instances between the visits undoes much of the good which more constant visiting would make secure ; and in order that the younger infants may not suffer unduly, children in their third, fourth, and fifth years are very irregularly visited unless some very unsatisfactory condition exists.

Tables 1 and 1A show the work done throughout the two years 1923 and 1924 in each district worked by the Health Visitors.

Table 2 compares the work of 1923 and 1924 with that of the three preceding years.

Notification of Births Act.

The decrease in the number of births has continued during the years 1923 and 1924; 15,388 births being registered in 1923, and 14,691 in 1924, as compared with 15,877 for 1922.

The total number of notifications received in 1923 under the Notification of Births Act was 15,753, of which 4,704 were from doctors, 10,480 from midwives, and 569 from parents. Out of the total of 15,753, those occurring in the districts covered by the Health Visitors numbered 12,507. The registered births within the City numbered 15,388, and of these 13,539 were referred to the Health Visitors.

In 1924, the number of notifications received under the Notification of Birth Act was 14,530, of which 4,369 were made by doctors, 9,759 by midwives, and 402 by parents. Out of the total of 14,530, those occurring in the districts covered by the Health Visitors numbered 12,184. The registered births within the City numbered 14,691, and of these 12,757 were referred to the Health Visitors.

In addition to the above, in 1923 the Health Visitors "found" on their respective districts 145 children who were born during the current year, 214 who were born during 1922, 221 born during 1921, 164 born during 1920, and 70 born during 1919, thus adding a total of 814 new cases to be visited to those already distributed to them through the Notification of Births Act.

In 1924, 201 infants who were born during the current year, 193 infants who were born during 1923, 199 infants born during 1922, 151 infants born during 1921, and 82 infants born during 1920, were found, making a total of 826 additional cases to be visited. These cases were either removals into Manchester from other towns or removals from (at present) unvisited areas of the City. The notification of the removal of an infant from one local authority to another has now become a general practice.

Deaths.

1,201 deaths of infants under one year of age occurred in the districts covered by the Health Visitors during 1923. Of these, 136 lived less than a day, 150 died over a day old and within a week, 197 died over a week old and within a month, 184 died over a month and under three months old, 167 over three months and under six months old, 178 over six months and under nine months old, and the remaining 189 between the ages of nine months and one year.

In 340 cases death was due to bronchitis and pneumonia, in 231 cases to prematurity, in 135 cases to enteritis, in 91 cases to debility and marasmus, in 69 cases to convulsions, in 20 cases to accidental deaths, including those due to want of attention at birth; 19 cases died from tuberculosis, 9 from syphilis, 13 from influenza, 62 from whooping cough, 9 from measles, and the remaining 203 deaths were due to various other causes.

In 1924, 1,375 deaths of infants under one year of age occurred. Of these, 151 lived less than a day, 158 died over a day old and within a week, 192 died over a week old and within a month, 222 died over a month and under three months old, 218 over three months and under six months old, 228 over six months and under nine months old, and the remaining 206 between the ages of nine months and one year.

In 357 cases death was due to bronchitis and pneumonia, in 268 cases to prematurity, in 133 cases to enteritis, in 141 cases to debility and marasmus, in 62 cases to convulsions, in 26 cases to accidental deaths, including those due to want of attention at birth; 26 cases died from tuberculosis, 19 from syphilis, 6 from influenza, 34 from whooping cough, 66 deaths from measles, and the remaining 237 deaths were due to various other causes.

Tables 3 and 3A show the distribution of deaths, according to districts, of children under one year of age.

There were 717 deaths of children of one to five years of age during 1923. Of these, 422 occurred in the second year of life, 146 in the third year, 104 in the fourth year, and 45 in the fifth year.

In 299 cases death was due to bronchitis and pneumonia, 51 children died from enteritis, 7 from debility and marasmus, 17 from convulsions, 18 from accidental causes, 55 from tuberculosis, 12 from influenza, 60 from measles, 104 from whooping cough, and 94 from various other causes.

In 1924, there were 1,009 deaths of children of one to five years of age. Of these 597 occurred in the second year of life, 205 in the third year, 108 in the fourth year, and 99 in the fifth year.

In 389 cases death was due to bronchitis and pneumonia, in 34 cases to enteritis, in 20 cases to debility and marasmus, in 14 cases to convulsions, in 31 cases to accidental deaths; 80 cases died from tuberculosis, 3 from syphilis, 16 from influenza, 65 from whooping cough, 242 from measles, and the remaining 115 deaths from various other causes.

Tables 4 and 4A show the distribution of deaths, according to districts, of children aged one to five years.

Summer Diarrhœa.

From July 15th to September 30th, 1923, 228 cases of summer diarrhœa were visited. Of these, 39 occurred during the last two weeks in July, 93 during the month of August, and 96 during the month of September. These figures are higher than those for the preceding year, when only 71 cases were visited.

113 of the total cases were children under twelve months, and of these, 31 were having breast feeding, 16 mixed feeding, and 66 entirely artificial feeding at the onset of the illness.

29 cases died, though not all of the deaths were ascribed to diarrhœa, 25 of the total deaths were those of children under one year of age, and of these 12 had not yet attained their fourth month.

Nineteen cases were admitted to hospital.

From July 15th to September 30th, 1924, the figures are lower again, 168 cases of summer diarrhœa being visited.

Of these, 37 occurred during the last two weeks in July, 67 during the month of August, and 64 during the month of September.

93 of the total cases were children under 12 months, and of these 30 were having breast feeding, 16 mixed feeding, and 66 entirely artificial feeding at the onset of the illness.

38 cases died. 31 of the total deaths were those of children under one year of age, and of these 19 had not yet attained their fourth month. 29 cases were admitted to hospital.

The distribution of these cases is shown in Table 5, where a comparison of the cases for 1923 and 1924 with those of the six preceding years also appears.

Child Welfare Centres.

The close co-operation between the Health Visitors and the Infant Welfare Centres continues. The Medical Officers of the Centres gave a course of lectures to the Health Visitors during the winter 1923/24. The Health Visitors' case sheets of all infants not progressing satisfactorily are referred to the Medical Officers of the Centres, likewise the previous reports of the Health Visitors on all new cases attending the Centres. A list of new attendances at each of the Infant Welfare Centres is sent in each week from each Centre to the Public Health Office, and the date of the attendance and the name of the Centre is entered on the infants' case sheet for the Health Visitors' information.

The Manchester Babies' Hospital.

The number of Corporation beds in the Manchester Babies' Hospital still remained at 18, and again the inadequacy of the accommodation resulted frequently in a long waiting list.

During 1923, 117 applications were received for admission to the hospital. Of these, 32 were cancelled for the following various reasons: 8 were admitted to other hospitals, 4 died before beds were available, 12 so much improved whilst on the waiting list that hospital treatment was no longer necessary, in 5 instances the parents at the last minute were unwilling to allow their children to go into hospital, and 3 cases were over age when vacancies occurred. The beds are reserved for children under one year of age. 85 cases were admitted to hospital.

During 1924, 103 applications were received for admission to the hospital. Of these, 14 were cancelled for the following various reasons: 10 were admitted to other hospitals, 1 died before a bed was available, 2 so much improved whilst on the waiting list that hospital treatment was no longer necessary, and in one instance the parents were unwilling to allow their child to go into hospital. 89 cases were admitted.

1923 Of the 85 cases admitted to the Babies' Hospital	1924 Of the 89 cases admitted to the Babies' Hospital	CHILD WELFARE CENTRES
10 cases	12 cases	Were sent in from the centre at 72, Rosamond St. West, C.-on-M.
8 ,,	3 ,,	Were sent in from the centre at 226, Hyde Road, Gorton
12 ,,	6 ,,	Were sent in from the centre at 45, Higher Ardwick
14 ,,	13 ,,	Were sent in from the centre at 93, Hamilton Street, Collyhurst
8 ,,	6 ,,	Were sent in from the centre at 135, Pollard Street, Ancoats
16 ,,	11 ,,	Were sent in from the centre at 1, Manipur Street, Openshaw
5 ,,	4 ,,	Were sent in from the centre at 153, Cheetham Hill Rd., Cheetham
2 ,,	5 ,,	Were sent in from the centre at 686, Oldham Road, Newton
6 ,,	5 ,,	Were sent in from the centre at 40, Lower Moss Lane, Hulme
2 ,,	3 ,,	Were sent in from the centre at Abbey Hey, Gorton
1 case	2 ,,	Were sent in from the centre at Conran Street, Harpurhey
1 ,,	0 ,,	Was sent in from the centre at Wilmslow Road Rusholme
0 ,,	4 ,,	Were sent in from the centre at Elm Street, Miles Platting
0 ,,	15 ,,	Were sent in from the Public Health Office
85	89	Total for the two years—174

The various conditions from which the children were notified to be suffering were :—

	Cases		Cases
Malnutrition	39	Debility	5
Atrophy	9	Marasmus	30
Dyspepsia	59	Gastritis	3
Rickets	13	Convulsions	1
Diarrhœa	1	Screaming fits	1
Vomiting	1	Cleft palate	1
Prematurity	4	T.B. peritonitis	1
Bronchitis	5	Dermatitis	1
		Total	174

The ages of the infants on admission were :—

	Cases		Cases
Under 1 month	4	Aged 7 months	7
Aged 1 ,,	18	,, 8 ,,	7
,, 2 months	37	,, 9 ,,	7
,, 3 ,,	23	,, 10 ,,	11
,, 4 ,,	16	,, 11 ,,	6
,, 5 ,,	14	Over 11 ,,	12
,, 6 ,,	12		
		Total	174

The length of stay in hospital varied, as follows:—

2	remained in hospital for	1 day
2	,, ,,	2 days
1	,, ,,	3 ,,
2	,, ,,	4 ,,
1	,, ,,	5 ,,
8	,, ,,	1 week
6	,, ,,	2 weeks
6	,, ,,	3 ,,
18	,, ,,	4 ,,
12	,, ,,	5 ,,
8	,, ,,	6 ,,
11	,, ,,	7 ,,
16	,, ,,	8 ,,
16	,, ,,	9 ,,
9	,, ,,	10 ,,
15	,, ,,	11 ,,
8	,, ,,	12 ,,
1	,, ,,	13 ,,
5	,, ,,	14 ,,
3	,, ,,	15 ,,
6	,, ,,	16 ,,
5	,, ,,	17 ,,
1	,, ,,	18 ,,
1	,, ,,	19 ,,
2	,, ,,	20 ,,
1	,, ,,	22 ,,
8	still in hospital	
174		

20 of the cases died in hospital and 24 have died since discharge. About 67 per cent. of the mothers attended the Infant Welfare Centres regularly after receiving their infants home again from hospital. The Health Visitors visited the children promptly as soon as the notification of discharge was received, and a report of the conditions found was sent to the hospital. Attendance at a Centre was always strongly urged. From the latest reports on the hospital cases, 97 were said to be in a satisfactory condition and 18 were unsatisfactory. 7 cases have removed out of Manchester.

Creche Ward, Monsall.

This ward is kept for the reception of children between the ages of 1 and 2 years suffering from malnutrition.

During 1923, 35 applications for admission to the Creche Ward were received, and 27 children were admitted. Of the remaining 8 cases, 3 were admitted to other hospitals, 3 were over the age for admission, and in 2 cases the parents refused to allow the children to go into hospital at all.

In 1924, 23 applications were received, and 19 children were admitted. Of the remaining 4 cases, 3 were admitted to other hospitals, and in the fourth case the parents refused to consent to the child being sent into hospital.

1923 Of the 27 cases who were admitted	1924 Of the 19 cases who were admitted	CHILD WELFARE CENTRES
2 cases	1 case	Were sent in from the centre at 40, Lower Moss Lane, Hulme
11 ,,	4 cases	Were sent in from the centre at 93, Hamilton Street, Collyhurst
2 ,,	2 ,,	Were sent in from the centre at 1, Manipur Street, Openshaw
2 ,,	6 ,,	Were sent in from the centre at 135, Pollard Street, Ancoats
4 ,,	1 case	Were sent in from the centre at 72, Rosamond St. West, C.-on-M.
1 case	0 ,,	Was sent in from the centre at Conran Street, Harpurhey
1 ,,	0 ,,	Was sent in from the centre at 153, Cheetham Hill Rd., Cheetham
1 ,,	1 ,,	Were sent in from the centre at Elm Street, Miles Platting
1 ,,	0 ,,	Was sent in from the centre at 686, Oldham Road, Newton
1 ,,	1 ,,	Were sent in from the centre at 226, Hyde Road, Gorton
0 ,,	1 ,,	Was sent in from the centre at 45, Higher Ardwick
1 ,,	2 cases	Were sent in by Dr. Drummond from the Public Health Office
27	19	Total for the two years—46 cases

38 children were admitted suffering from rickets
3 ,, ,, ,, debility
2 ,, ,, ,, malnutrition
2 ,, ,, ,, bronchitis
1 child was ,, ,, T.B. abdomen
46

The length of stay in hospital varied from three weeks to 27 weeks.

Of the 33 cases who were discharged, 18 are now reported to be in a satisfactory condition, 12 are still unsatisfactory but continue to improve, and 2 are very unsatisfactory. One case has left Manchester, so that we have been unable to follow it up.

Only 13 children attended the Infant Welfare Centre after their discharge.

Three children died during the time they were in hospital in 1923. There were no deaths in 1924.

Measles, German Measles, and Whooping Cough Section.

During the year 1923 the number of cases of measles notified was comparatively low, 3,481 notifications in all being received, but in 1924 there was a very heavy measles epidemic, and 18,349 cases were notified.

As in the epidemic of 1922, the amount of visiting done in connection with the measles epidemic of 1924, which began in April and continued well on into July, necessarily caused considerable interference with the routine of the infant work, but as many children under five years of age were affected, the number of "infant visits" was not lowered to any great extent, and therefore such statistics are no indication of the actual amount of the disturbance caused by such epidemics in the Health Visitors' ordinary work.

The Ministry of Health sanctioned the appointment of four temporary Measles Visitors to assist in the additional work. They were appointed on April 7th, and remained on the staff until July 31st, but in view of the severity of the epidemic their services in no way released the permanent Health Visitors for the carrying out of their usual duties.

Measles, 1923.

Cases notified by doctors	2,478
Cases found by Health Visitors or notified by others than doctors	1,003
Total number of cases notified	3,481
Total number of cases investigated	3,345

Of the 3,345 cases investigated, 3,232 were nursed at home. There were 90 cases complicated by pneumonia, and of these 38 died.

113 cases were nursed in hospitals.

70 were admitted as cases of measles, of these, 27 suffered from pneumonia which proved fatal in 19 instances; of the remaining 43 patients, 42 recovered and 1 died.

The majority of these 70 cases were seriously ill before admission to hospital, and many were removed from homes where the conditions were very much against their recovery.

In addition to the above 70 cases, 43 developed measles whilst in institutions, and of these, 19 suffered from pneumonia, 14 of whom died, and of the remaining 24 patients, 14 recovered and 10 died.

The Health Visitors paid 9,424 visits in respect of measles throughout the year.

German Measles.

Total number of German Measles cases notified ..	94
,, ,, ,, ,, visited	85
,, ,, ,, ,, recovered ..	93
,, ,, ,, ,, died	1

Measles, 1924.

Cases notified by doctors	13,095
Cases found by Health Visitors or notified by others than doctors	5,254
Total number of cases notified	18,349
Total number of cases investigated	17,171

Of the 17,171 cases investigated, 16,631 were nursed at home. There were 648 cases complicated by pneumonia, and of these 234 died.

540 cases were nursed in hospitals.

436 were admitted as cases of measles, of these, 182 suffered from pneumonia which proved fatal in 67 instances; of the remaining 254 patients, 236 recovered and 18 died.

The increase in the number of cases admitted to hospital during this year is a reflection of the epidemic which prevailed during the spring and early summer.

In addition to the above 436 cases, 104 patients developed the disease whilst in institutions, and of these, 26 suffered from pneumonia, 9 of whom died; of the remaining 78 patients, 52 recovered and 26 died.

The Health Visitors paid 39,651 visits in respect of measles throughout the year.

German Measles.

Total number of German Measles cases	notified	224
,, ,, ,, ,,	visited	196
,, ,, ,, ,,	recovered	223
,, ,, ,, ,,	died	1

Whooping Cough, 1923.

Whooping cough is not a notifiable disease. The notifications were sent in chiefly by School Attendance Officers and the Health Visitors.

Total number of cases notified	3,804
Total number of cases visited	3,725

Out of 3,725 cases visited, 3,613 were nursed at home. There were 183 cases complicated by pneumonia, and of these 97 died.

The number of cases sent to hospital was 99, and of these 57 developed pneumonia.

These latter 57 cases were admitted to the following hospitals:—

Booth Hall 54, Monsall 1, and Ancoats 2; 17 cases recovered and 40 died.

The remaining 42 cases sent to hospital were uncomplicated by pneumonia; 36 recovered and 6 died.

In addition to the above 99 cases sent to hospital suffering from whooping cough, other 13 cases developed whooping cough in hospital, 12 of whom had a complication of pneumonia and died.

The Health Visitors paid 9,314 visits in respect of whooping cough throughout the year.

In 1922, the number of whooping cough cases notified was 2,162.

Whooping Cough, 1924.

Whooping cough is not a notifiable disease. The notifications were sent in chiefly by School Attendance Officers and the Health Visitors.

Total number of cases notified	1,706
Total number of cases visited	1,681

Out of 1,681 cases visited, 1,561 were nursed at home. There were 118 cases complicated by pneumonia, and of these 63 died.

The number of cases sent to hospital was 109, and of these 54 developed pneumonia.

These latter 54 cases were admitted to the following hospitals :—

Booth Hall 42, Monsall 12 ; 22 cases recovered and 32 died.

The remaining 55 cases sent to hospital were uncomplicated by pneumonia; 46 recovered and 9 died.

In addition to the above 109 cases sent into hospital suffering from whooping cough, other 11 cases developed whooping cough in hospital, 10 of whom died, 4 having had a complication of pneumonia.

The Health Visitors paid 4,634 visits in respect of whooping cough throughout the year.

The distribution of measles, German measles, and whooping cough throughout the City during 1923 and 1924, and the mortality therefrom, together with a report showing how the various age groups have been affected by measles, are to be found elsewhere. (See pages 72–78.)

Pneumonia.

A full report of the work done during 1923 and 1924 with regard to pneumonia appears elsewhere. (See pages 189–191.)

In 1923, 2,625 notifications of pneumonia were received; 2,068 referred to cases of primary pneumonia, 426 to cases of influenzal pneumonia, and 131 to cases of secondary pneumonia. Secondary pneumonia does not come under the Pneumonia, Malaria, and Dysentery Regulations of 1918, but being notified, a record was kept of the cases and they were investigated.

In addition to the notified cases, 518 deaths from pneumonia, not previously notified, were brought to our notice from the death returns.

Of the 3,143 total known cases of pneumonia, 3,014 were fully investigated and the Health Visitors paid 6,946 visits in connection with these investigations.

In 1924, 2,939 notifications of pneumonia were received; 2,203 referred to cases of primary pneumonia, 447 referred to cases of influenzal pneumonia, and 229 referred to cases of secondary pneumonia.

In addition, 484 deaths from pneumonia were brought to our notice through the death returns, thus making a total of 3,423 known cases of pneumonia. 3,274 of these cases were fully investigated, and 7,727 visits were paid by the Health Visitors in connection with these investigations.

Influenza.

In 1923, 478 cases of influenza, other than influenzal pneumonia, were brought to the notice of the department, and were fully investigated by the Health Visitors who paid 889 visits in connection with these cases.

In 1924, 356 cases of influenza were brought to our notice. The Health Visitors investigated 347 of these cases, and 713 visits were paid.

Relief.

The grant (which originated in 1917) to supply milk to young children suffering from measles, whooping cough, pneumonia, etc., in families where the actual income was below the standard scale, was continued during the years 1923 and 1924, but the sum was reduced from the original £200 to £120.

Throughout the year 1923, 350 applications for milk were granted, and 5,142 pints of milk were given.

During 1924, 512 applications for milk were granted, and 7537 pints of milk were given.

As in preceding years, we have endeavoured to use these grants of milk as a means towards the better nursing of young patients at home, and have insisted upon the necessary instructions given by the Health Visitors being carried out, as far as means would permit, wherever relief has been given.

Verminous Work.

During 1923, the number of notifications in respect of verminous cases received from the Education Authorities was 700. In 1924, 582 were received. These numbers show a considerable increase for 1923, but for 1924, the number of notifications was practically the same as in 1922, when 580 were received.

With regard to cases of scabies, 189 notifications of families thus affected were received from the Education Authorities in 1923, and 215 such notifications were received in 1924, as compared with 27 in 1922.

The Cleansing Station was in use on 9 days for the compulsory cleansing of school children throughout 1923, and 41 children were cleansed. Of these, 11 had body vermin only, 22 had head vermin only, and 8 had body and head vermin. 6 other voluntary cleansings were also carried out at the Cleansing Station, the cases being too seriously infested to be dealt with satisfactorily in their own homes.

During 1924, the Cleansing Station was in use on four days, and 13 compulsory cleansings were carried out. Of these, 7 had head vermin only, and 6 had both body and head vermin. There were, in addition, again 6 voluntary cleansings.

In addition to her work at the Cleansing Station and the clerical duties appertaining to this appointment, the Cleansing Nurse paid 714 visits to verminous cases, and carried out cleansings of 170 children in their homes at the request of the parents, during 1923.

In 1924, 653 visits were paid, and 106 "home cleansings" were carried out.

Although these "home cleansings" take much time the results are sufficiently satisfactory to justify their continuance.

Where necessary the clothing and bedding have been stoved after these cleansings have been carried out.

One case of neglect was referred to the National Society for the Prevention of Cruelty to Children in 1923, and two were referred in 1924, and visits from the Society's Officers have been helpful even without resorting to prosecution.

A summary of the work done by the Health Visitor appointed by the "Ladies Society for Visiting the Jewish Poor," and whose work is subjected to the supervision of the Medical Officer of Health, is given in the following tables.

Work of the Jewish Health Visitors during the Year 1923.

DISTRICT	House-to-house Inspections								Re-inspections			Primary Infants	Subsequent	Children from 1 to 5 years	Total Number of Visits
	Number of Visits	Overcrowdings	Disrepair	Dirty	Cellars Dirty or Dilapidated	Yards Defective	W.C.'s Defective	Referred to Sanitary Dept.	Number of Visits	Defects Remedied	New Complaints Referred				
Red Bank and Strangeways	606	..	..	..	..	..	..	319	259	271	292	282	2324	1418	4889
TOTAL	606	..	..	..	..	..	..	319	259	271	292	282	2324	1418	4889

Work of the Jewish Health Visitors during the Year 1924.

DISTRICT	House-to-house Inspection								Re-inspections			Primary Infants	Subsequent	Children from 1 to 5 years	Total Number of Visits
	Number of Visits	Overcrowdings	Disrepair	Dirty	Cellars Dirty or Dilapidated	Yards Defective	W.C.'s Defective	Referred to Sanitary Dept.	Number of Visits	Defects Remedied	New Complaints Referred				
Red Bank and Strangeways	579	..	203	..	..	1	..	229	262	216	221	183	2313	1985	5322
TOTAL	579	..	203	..	..	1	..	229	262	216	221	183	2313	1985	5322

TABLE I.—HEALTH VISITORS' YEARLY SUMMARY.—TOTALS FOR THE 52 WEEKS ENDING DECEMBER 29th, 1923.

DISTRICT	INFANT WORK								SANITARY DEFECTS			LIMEWASHING												SCABIES		VERMINOUS WORK		MEASLES WORK				WHOOPING COUGH		PNEUMONIA		INFLUENZA		MISCELLANEOUS VISITS									REMARKS
																						No. of Limewash Tickets						Measles		German Measles									Neglected Children								
	No. of Births occurring	Primary Visits	Subsequent Visits	Children 1 to 2 years	Children 2 to 3 years	Children 3 to 4 years	Children 4 to 5 years	Investigations re Deaths from Diarrhœa of children under 5 years	Defects Found	Defects Remedied	Special Visits re Defects	Special Visits re Limewashing	Bedrooms	Kitchens	Yards	Closets	Cellars	Coal Places	Ceiling	Staircases	Others	Given	Collected	Primary Visits	Subsequent Visits	Primary Visits	Subsequent Visits	Primary Visits	Subsequent Visits	Primary Visits	Subsequent Visits	Primary Visits	Subsequent Visits	Primary Visits	Subsequent Visits	Primary Visits	Subsequent Visits	Visits re Inquests	P.	S.	Expectant Mothers*	Visits re Infantile Diarrhœa*	Visits re Sick Children	Visits re Relief	Visits "Out"	TOTAL VISITS	
Ancoats—West	193	212	1,295	1,180	1,197	1,132	614	1	7	12	12	106	136	57	80	31	9	18	109	69	—	84	142	2	—	3	33	39	51	—	—	49	58	54	91	1	—	—	—	—	—	*1*	6	14	204	6,354	Vacant 11th November, 1923.
,, North	222	244	1,414	1,157	1,061	940	694	6	49	33	94	335	246	122	116	116	20	90	72	108	—	96	142	1	—	5	7	7	12	—	—	33	68	13	19	—	—	—	—	—	*2*	—	3	2	156	6,271	
,, Central	199	211	1,684	1,362	1,172	631	280	6	56	55	24	19	64	37	73	71	8	9	65	12	3	112	116	2	3	12	15	26	86	1	—	127	170	34	87	10	4	—	—	—	*2*	—	—	1	—	5,967	
,, South	317	222	1,270	1,010	1,017	958	607	4	38	60	22	369	199	184	153	153	23	100	90	103	2	198	212	1	—	28	71	4	23	—	—	5	18	12	31	—	—	—	—	—	—	—	—	—	—	5,672	
,, East	243	225	1,251	972	745	604	320	2	195	324	252	397	127	99	108	110	5	2	141	16	1	194	223	2	2	14	107	32	35	—	1	139	84	47	70	1	3	—	—	—	*39*	*1*	1	2	22	5,330	Vacant 24th November, 1923.
London Road	218	218	1,471	922	776	492	286	3	48	68	55	123	131	48	65	66	3	5	76	21	—	69	74	9	6	8	61	19	41	—	1	57	124	35	101	1	—	—	—	—	—	—	—	3	—	4,812	Vacant 17th November, 1923.
St. George's—North	215	218	798	788	754	819	562	6	17	37	4	68	57	31	21	25	2	—	7	32	3	28	33	1	1	9	34	3	7	—	—	16	28	4	11	—	—	—	—	—	—	—	—	4	—	4,135	
,, South	307	356	1,287	987	1.021	910	603	5	10	3	—	50	11	2	12	3	1	—	13	1	—	23	43	—	1	5	28	11	38	—	6	75	114	34	88	4	6	1	—	—	*23*	—	1	—	99	5,730	
,, East	307	318	1,290	1,017	1,016	903	551	6	55	80	7	—	38	12	70	70	—	11	27	4	—	82	86	2	1	10	11	30	59	—	—	179	154	59	118	11	3	—	—	—	—	—	6	1	156	5,908	
,, Central	214	221	1,435	1,073	521	309	330	3	79	210	64	43	57	31	27	14	1	—	74	2	2	54	63	1	1	6	50	6	2	1	3	68	115	23	60	19	9	—	—	—	—	*1*	1	22	87	4,473	
C.-on-M.—North	237	344	1,620	1,084	953	673	426	4	116	112	107	89	47	29	19	22	4	6	79	10	—	33	36	5	14	6	255	35	83	—	—	83	133	68	57	103	31	—	—	—	*38*	*57*	—	11	86	6,270	
,, South	380	378	1,040	733	663	417	344	3	122	79	125	9	6	—	3	1	2	—	—	—	—	13	14	7	4	15	38	28	52	—	—	27	63	14	22	10	16	—	—	—	—	*8*	9	—	—	4,017	
East	335	311	1,574	958	680	500	270	6	13	16	6	2	2	—	—	—	1	—	—	—	—	—	—	2	2	1	—	31	44	—	—	50	25	4	1	—	—	—	—	—	*2*	—	—	—	148	4,615	
,, West	346	381	1,657	955	848	712	483	6	30	75	77	67	32	10	15	17	1	1	16	6	11	21	24	2	2	34	79	71	160	—	—	14	11	20	22	1	4	—	1	1	*71*	—	—	17	129	5,754	
Hulme—East	320	337	1,431	1,044	971	743	490	2	35	67	54	54	28	5	17	16	6	3	4	7	—	44	38	3	1	10	79	114	187	1	1	30	44	33	24	9	—	—	—	—	—	—	1	2	84	5,749	
,, West	307	331	1,039	806	832	614	391	8	14	8	—	9	23	14	20	17	8	1	4	—	—	19	29	6	4	9	42	169	287	—	—	28	36	27	29	2	2	—	—	—	—	*2*	1	14	72	4,758	
,, North	199	235	1,399	970	801	766	382	1	50	64	2	—	21	13	43	28	3	2	29	3	—	68	79	3	1	15	22	85	147	—	—	48	81	23	45	18	17	—	—	—	*80*	*9*	1	1	144	5,207	
,, South	270	309	1,405	809	705	528	387	4	16	14	2	—	1	8	17	6	13	2	8	1	—	24	35	8	1	11	22	63	140	1	—	31	53	13	17	1	1	—	—	—	—	*31*	2	—	107	4,620	
,, S.E.	326	390	1,798	1,005	853	762	552	—	29	17	19	31	7	6	18	12	9	1	12	1	—	31	22	1	—	13	58	63	218	—	2	37	86	31	97	4	3	—	—	—	—	—	—	—	101	6,124	
,, Central	301	311	1,554	1,201	1,071	1,062	721	3	51	62	—	—	6	15	54	46	5	2	51	—	—	70	75	2	—	6	99	81	309	—	—	28	79	20	52	2	—	—	—	—	*8*	—	—	—	177	6,778	
Gorton	228	243	971	763	649	581	533	3	21	11	7	70	112	44	38	84	5	3	1	5	—	51	90	3	3	6	11	163	210	1	2	54	52	29	31	2	—	—	—	—	—	—	—	8	44	4,439	
,, East	223	228	1,280	892	823	660	556	1	34	27	5	39	53	19	3	9	—	—	27	8	—	17	58	—	1	4	45	59	85	3	3	40	74	19	22	45	33	—	—	—	—	—	10	—	29	4,956	
,, South	416	437	1,080	609	490	339	308	3	22	31	21	82	75	35	18	16	—	1	66	11	—	32	45	2	2	5	10	61	85	—	1	62	69	16	29	13	3	—	—	—	—	—	—	—	93	3,820	
,, West	243	273	939	631	573	433	421	—	130	21	27	92	37	16	15	7	2	1	38	7	—	46	50	2	—	5	18	8	43	—	3	33	86	8	—	17	8	—	—	—	—	*1*	—	—	123	3,743	8 weeks vacant.
Ardwick—North	215	234	1,345	827	850	657	397	1	34	45	80	124	61	27	27	11	—	—	13	5	—	57	61	2	1	6	18	78	113	1	1	74	59	13	15	1	—	—	—	—	*102*	—	2	3	105	5,007	
,, South	249	268	1,336	904	995	644	487	2	118	111	10	9	61	31	39	25	9	4	15	5	—	54	67	1	2	19	87	31	85	2	9	57	139	23	41	3	6	1	—	—	*1*	*4*	—	3	83	5,247	
,, East	273	300	1,332	1,113	840	544	277	2	204	69	74	36	50	18	15	5	1	1	7	7	—	37	43	—	—	9	70	34	70	—	9	58	95	28	38	21	16	—	—	—	*45*	—	8	—	97	5,071	
,, Central	172	178	1,529	934	862	615	228	4	30	10	12	9	14	13	10	12	—	2	6	7	—	8	14	4	12	15	31	12	20	—	—	20	42	14	46	2	3	—	—	—	*9*	—	—	—	36	4,628	
Openshaw	423	437	1,332	629	501	440	358	4	65	10	10	27	45	25	19	21	—	1	35	1	—	34	34	2	1	13	95	42	123	1	—	32	73	25	37	5	—	—	—	—	*1*	*8*	31	5	44	4,267	
Miles Platting	192	196	681	667	665	594	509	1	82	63	155	40	22	17	15	17	6	13	10	2	—	29	28	—	—	13	23	3	9	—	—	4	19	6	5	—	4	—	2	6	—	*3*	1	18	42	3,663	18 weeks vacant.
Newton	253	275	1,332	857	934	686	381	1	68	20	2	—	14	11	9	1	—	—	13	3	—	38	28	2	—	4	11	8	15	—	—	95	174	45	49	2	2	—	—	—	—	*2*	—	2	—	4,877	
Newton—East	264	284	1,134	511	755	875	513	1	17	4	—	—	14	4	4	2	—	—	19	1	1	23	13	—	—	13	25	18	39	—	—	100	237	5	40	5	11	—	—	—	—	—	1	4	41	4,612	
Monsall—West	250	298	1,344	985	885	666	475	10	14	25	5	6	14	15	17	13	7	3	2	2	—	24	36	6	6	16	71	45	18	—	1	62	128	27	44	—	—	—	—	—	—	—	—	—	44	5,142	
,, East	297	327	1,391	857	710	500	393	4	131	109	87	—	115	63	43	24	—	—	5	15	—	103	108	2	1	21	37	5	16	—	1	97	263	30	69	4	3	—	—	—	—	—	—	12	83	4,913	
Beswick	251	265	907	616	671	397	296	1	154	22	—	159	51	32	48	38	2	15	52	24	—	61	77	2	2	5	10	4	27	—	—	29	11	9	22	2	1	—	—	—	*9*	*3*	14	—	23	3,473	14 weeks vacant.
Bradford	248	261	805	570	532	434	422	1	20	10	—	76	79	44	47	48	3	2	101	17	5	63	82	2	2	14	113	41	120	3	6	62	170	26	70	—	—	—	—	1	*4*	—	2	26	4	3,853	
Lougsight	224	275	1,011	717	698	585	436	—	96	43	106	76	52	35	35	17	4	3	24	6	2	65	71	—	—	—	3	5	23	1	2	44	59	12	20	35	4	—	—	—	*35*	—	2	—	137	4,251	
Harpurhey	340	268	1,084	783	611	545	519	3	114	65	67	15	38	19	7	13	—	—	11	4	—	30	32	—	—	—	22	28	13	—	—	23	50	26	27	3	—	—	—	—	*4*	—	—	1	97	4,185	
Blackley	237	263	1,006	778	714	639	413	—	11	4	6	2	1	1	—	—	—	1	—	—	—	1	1	—	—	4	12	10	23	1	2	30	74	13	24	—	—	—	—	—	—	—	1	—	25	4,040	
District I.	240	263	1,340	1,058	871	692	302	—	175	50	23	1	48	17	17	19	3	6	39	19	8	49	66	9	2	16	35	40	73	1	—	160	118	15	34	—	1	1	—	—	—	*7*	—	11	130	5,196	
,, II.	329	348	1,346	843	832	667	549	7	4	—	48	—	5	1	24	25	1	13	8	2	1	22	27	4	—	16	64	71	115	2	1	65	107	32	57	10	—	—	—	—	—	*6*	2	25	5	5,216	
Clayton	329	414	1,427	1,209	715	213	62	2	4	2	1	—	35	17	14	16	1	3	26	17	2	31	28	3	6	17	51	58	282	1	—	41	182	32	74	5	1	—	—	—	—	*6*	—	4	—	4,800	
Moston	415	472	1,280	809	565	85	23	2	25	26	19	1	2	2	—	1	—	—	4	1	—	2	2	—	—	—	—	5	53	—	—	15	11	10	16	9	5	—	—	—	*1*	—	1	1	109	3,491	7 weeks on Miles Platting.
Moss Side	511	684	912	855	771	361	69	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	34	67	1	—	92	94	9	11	19	7	1	—	2	—	*1*	3	—	193	4,186	
Rusholme	531	714	692	956	723	299	45	2	42	2	1	1	—	—	—	—	—	—	—	—	—	—	—	2	—	—	4	24	42	6	1	44	45	24	26	7	—	—	—	—	—	—	1	1	133	3,793	
Kirkmanshulme	427	578	1,392	625	179	86	50	—	36	17	36	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	16	14	1	2	86	159	12	21	4	3	—	—	—	*2*	—	—	—	—	3,266	
Withington	303	253	220	167	150	98	73	—	4	21	32	—	—	—	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—	—	1	—	—	1	—	—	—	—	—	—	—	—	—	78	1,073	Worked from 22nd Sept., 1923.
Measles I.	—	13	121	218	274	261	1	1	—	—	40	12	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	268	571	12	16	261	485	368	407	31	14	—	—	—	—	—	132	10	635	4,152	
,, II.	—	2	221	260	260	518	—	—	8	11	15	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	396	406	14	11	132	216	496	465	86	27	—	—	—	—	—	9	49	500	4,084	
,, III.	—	—	450	532	544	343	163	—	41	5	48	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	606	906	24	24	259	301	429	571	49	17	—	—	—	—	—	15	—	608	5,889	
,, IV.	—	6	567	380	457	408	214	1	39	167	297	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	270	417	4	—	373	548	613	613	36	8	—	—	—	—	—	3	3	401	5,620	
Out Districts	—	72	314	302	300	310	161	—	8	11	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	1,463	Worked 15th Sept., 1923.
TOTALS	‡13,539	14,901	59,923	42,890	38,056	29,650	18,927	137	2,781	2,408	2,161	2,648	2,237	1,229	1,395	1,248	168	315	1,399	565	41	2,141	2,548	108	85	442	1,981	3,360	6,064	83	109	3,629	5,685	2,982	3,067	613	276	4	3	10	*478*	*154*	270	280	5,716	244,960	

* Miscellaneous visits :—Figures in italics represent records of advice given to expectant mothers and visits to children suffering from Infantile Diarrhœa discovered while visiting homes for other purposes and are already included in this table under the heading " subsequent visits " in connection with infant work.

‡ The excess of primary visits over the number of births is to be accounted for (*a*) by the number of " found cases " seen for the first time by the Health Visitor during the year ; and (*b*) by the removal of infants from the address where the birth took place usually to some other district prior to the Health Visitor's visit, in which case two Health Visitors have claimed a primary visit each for only one birth.

TABLE 1.—HEALTH VISITORS' YEARLY SUMMARY—TOTALS FOR THE 53 WEEKS ENDING JANUARY 3rd, 1925.

DISTRICT	Births	INFANT WORK							Other Sanitary Defects found and referred to Sanitary Department		
		Primary Visits	Sub-sequent Visits 1st year	Children in their 2nd year	Children in their 3rd year	Children in their 4th year	Children in their 5th year	Infantile Diarrhœa Investigations (Deaths)	Found	Remedied	Visits
Ancoats—West	177	200	1,167	747	746	682	550	2	13	30	21
,, North	220	234	1,306	1,147	1,129	1,104	905	2	30	22	67
,, Central	190	207	1,257	1,083	899	888	573	2	45	18	6
,, South	320	202	1,317	962	829	731	645	4	105	72	86
,, East	226	241	998	736	774	613	520	1	20	5	—
London Road	190	209	924	732	654	634	520	6	21	42	8
St. George's North	196	204	748	605	737	622	724	4	25	41	25
,, South	275	313	1,078	620	626	608	467	4	4	—	2
,, East	249	257	913	928	857	847	976	6	41	46	3
,, Central	229	227	1,077	793	968	919	806	2	27	1	2
C.-on-M.—North	252	307	1,530	1,026	1,060	1,044	658	8	55	38	53
,, South	333	356	1,040	777	704	588	589	6	47	27	54
,, East	325	340	1,196	888	706	540	513	6	6	3	8
,, West	356	396	831	748	796	726	822	1	76	63	32
Hulme—East	287	290	1,593	1,024	927	943	544	4	18	34	39
,, West	290	303	1,041	717	619	511	500	6	13	6	—
,, North	183	233	1,026	722	777	874	446	3	42	22	5
,, South	273	253	1,319	1,097	929	870	648	3	29	1	1
,, S.E.	333	334	1,439	800	832	740	658	3	43	19	46
,, Central	296	332	1,299	780	841	797	597	8	47	35	69
Gorton	232	234	921	772	740	677	655	1	20	2	13
,, East	262	331	916	576	515	552	565	1	10	27	2
,, South	387	379	823	561	594	559	458	—	14	8	12
,, West	222	247	761	592	497	366	263	—	67	15	17
Ardwick—North	216	233	988	787	888	986	616	2	31	17	14
,, South	242	254	1,167	833	842	792	680	9	74	48	8
,, East	277	308	1,144	865	913	1,030	372	6	120	2	48
,, Central	192	190	985	609	620	473	266	2	17	23	9
Openshaw	425	463	1,576	482	437	356	365	4	45	62	63
Miles Platting	186	231	747	798	880	863	737	2	203	122	320
Newton	220	139	539	263	291	231	212	1	6	2	7
Newton—East	242	264	1,191	818	779	719	508	3	8	—	1
Monsall—West	252	266	988	749	746	753	710	8	5	33	51
,, East	225	230	644	524	451	486	540	5	71	33	6
Beswick	249	263	1,073	915	997	537	202	2	113	63	3
Bradford	246	287	781	546	583	509	660	4	115	52	—
Longsight	200	224	843	603	609	585	526	—	64	26	47
Harpurhey	292	288	1,065	743	765	757	666	4	116	75	170
Blackley	260	334	731	609	638	627	504	2	5	—	—
District I.	205	243	1,140	882	686	658	550	3	107	57	57
,, II.	289	300	1,254	779	786	694	618	5	23	44	62
Clayton	302	360	871	839	788	619	298	2	4	2	—
Moston	358	367	856	708	696	614	232	2	23	22	8
Moss Side	355	504	704	593	583	472	183	1	1	10	2
Rusholme	511	544	792	677	618	485	136	4	32	22	12
Kirkmanshulme	406	397	1,037	735	565	223	144	5	20	60	47
Withington	304	388	1,323	288	298	185	60	5	23	5	3
Gorton S.A.	—	77	266	240	251	223	113	—	9	3	—
Measles I.	—	30	160	192	178	224	57	5	—	—	6
,, II.	—	—	307	329	334	702	—	—	11	4	5
,, III.	—	15	382	500	530	425	212	—	22	—	18
,, IV.	—	91	641	332	502	456	330	1	—	—	—
,, V.	—	—	—	92	107	81	—	—	35	46	13
,, VI.	—	—	88	108	115	149	200	—	3	—	—
,, VII.	—	—	105	57	41	49	53	—	—	—	—
,, VIII.	—	—	54	74	65	82	82	—	—	—	—
TOTALS	12,757	13,928	50,965	37,002	36,338	33,480	25,434	170	2,124	1,410	1,551

DISTRICT	LIME-WASHING										Number of Lime-Wash Tickets		SCABIES	
	Visits	Bed-rooms	Kitchens	Yards	Closets	Cellars	Coal Places	Ceilings	Stair-cases	Others	Given	Collected	Primary Visits	Sub-sequent Visits
Ancoats—West	5	32	16	37	5	2	—	41	9	1	67	104	7	7
,, North	310	201	105	97	92	15	84	79	79	—	89	116	2	1
,, Central	5	36	18	31	28	—	14	32	1	—	70	63	3	1
,, South	236	101	83	87	89	6	21	102	29	—	129	139	3	1
,, East	2	31	25	54	51	—	1	7	4	—	54	61	2	—
London Road	—	8	8	30	26	29	6	14	4	—	29	52	1	1
St. George's North	60	65	36	24	24	—	2	1	33	2	35	37	2	—
,, South	70	22	20	36	26	—	—	45	7	—	28	77	5	4
,, East	—	3	15	117	110	—	—	82	3	1	129	146	4	3
,, Central	4	39	24	27	20	1	2	69	5	—	34	42	2	1
C.-on-M.—North	52	27	33	33	32	5	30	62	8	—	38	44	2	5
,, South	14	9	7	12	4	5	1	—	—	2	—	12	2	—
,, East	—	2	—	1	1	—	1	2	1	—	1	2	4	13
,, West	1	7	6	6	3	—	1	14	4	—	16	32	2	—
Hulme—East	33	30	9	13	17	1	1	20	1	—	16	26	4	1
,, West	—	9	4	19	10	8	1	13	1	8	49	48	10	14
,, North	10	6	5	18	9	3	—	11	1	—	35	34	4	4
,, South	—	—	3	4	1	—	2	2	—	—	13	14	2	—
,, S.E.	21	12	6	18	17	7	2	8	3	—	25	24	7	11
,, Central	62	15	11	22	14	—	—	4	—	—	30	33	5	4
Gorton	60	117	49	32	80	8	2	1	4	—	52	104	1	6
,, East	10	37	18	1	6	—	1	24	2	1	14	27	—	—
,, South	50	57	26	8	4	—	—	61	12	—	22	41	2	4
,, West	90	25	27	22	22	—	5	44	8	1	43	41	4	2
Ardwick—North	32	32	9	14	9	1	1	6	—	—	48	40	—	1
,, South	43	52	18	27	16	13	5	56	10	—	41	55	3	6
,, East	59	41	29	17	20	3	3	19	13	—	30	34	3	4
,, Central	1	2	6	5	5	8	1	6	—	—	23	20	1	3
Openshaw	32	65	35	20	20	—	4	67	17	—	23	33	5	7
Miles Platting	94	97	58	63	64	5	21	94	43	—	96	87	—	—
Newton	—	—	—	—	—	—	—	—	—	—	4	4	1	1
Newton—East	3	6	5	4	2	1	—	3	3	—	8	7	—	—
Monsall—West	—	6	4	7	10	4	—	3	—	—	13	10	1	2
,, East	—	13	6	7	3	—	—	7	2	—	35	42	1	—
Beswick	258	122	48	109	73	1	30	49	39	—	135	166	2	2
Bradford	32	86	34	36	44	6	—	84	16	—	87	84	—	2
Longsight	33	55	13	11	2	3	1	2	—	16	31	44	—	—
Harpurhey	14	25	5	3	5	—	—	15	—	—	22	19	4	1
Blackley	—	—	—	—	—	—	—	—	—	—	—	—	—	—
District I.	29	32	24	12	9	1	—	29	15	2	24	32	2	1
,, II.	—	10	4	6	6	—	—	13	2	—	10	20	6	2
Clayton	—	8	1	8	3	—	3	15	6	—	19	20	1	6
Moston	4	2	2	1	1	—	—	2	1	—	2	3	—	—
Moss Side	5	1	—	1	—	—	—	—	—	—	1	1	—	—
Rusholme	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Kirkmanshulme	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Withington	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Gorton S.A.	—	2	1	—	—	—	—	—	—	—	—	2	—	—
Measles I.	18	—	—	—	—	—	—	—	—	—	—	1	—	—
,, II.	—	—	—	—	—	—	—	—	—	—	—	—	—	—
,, III.	—	—	—	—	—	—	—	—	—	—	—	—	—	—
,, IV.	—	—	—	—	—	—	—	—	—	—	6	5	—	—
,, V.	—	—	—	—	—	—	—	—	—	—	—	—	—	—
,, VI.	—	—	—	—	—	—	—	—	—	—	—	—	—	—
,, VII.	—	—	—	—	—	—	—	—	—	—	—	—	—	—
,, VIII.	—	—	—	—	—	—	—	—	—	—	1	5	—	—
TOTALS	1,752	1,548	856	1,100	983	136	246	1,208	386	34	1,677	2,053	110	121

DISTRICT	VERMINOUS CHILDREN		MEASLES WORK				WHOOPING COUGH		PNEUMONIA		INFLUENZA	
			MEASLES		GERMAN MEASLES							
	Primary Visits	Sub-sequent Visits	Primary Visits	Sub-sequent Visits	Primary Visits	Sub-sequent Visits	Primary Visits	Sub-sequent Visits	Primary Visits	Sub-sequent Visits	Primary Visits	Sub-sequent Visits
Ancoats—West	18	25	190	475	—	—	19	37	47	98	8	6
,, North	10	16	159	510	—	—	6	17	28	128	—	—
,, Central	22	16	302	395	—	—	7	11	112	118	16	5
,, South	11	81	75	229	—	—	6	13	33	67	2	3
,, East	8	15	357	483	1	1	12	16	53	67	6	3
London Road	5	34	151	281	1	—	28	49	38	93	14	13
St. George's North	2	4	66	239	—	—	6	22	12	57	—	—
,, South	5	41	227	472	—	—	4	2	65	154	2	—
,, East	5	57	231	502	—	—	15	34	44	126	3	2
,, Central	2	22	278	457	1	3	33	45	34	60	6	5
C.-on-M.—North	2	124	219	517	—	—	50	164	50	99	43	46
,, South	16	21	233	420	2	4	43	59	38	32	8	1
,, East	5	3	225	263	1	4	52	56	32	36	5	—
,, West	31	89	225	305	2	11	27	40	50	66	11	7
Hulme—East	8	70	161	214	—	2	75	114	62	102	8	6
,, West	13	88	164	338	—	2	46	101	34	68	4	—
,, North	7	18	135	349	—	1	55	123	24	30	4	6
,, South	4	30	241	311	2	—	37	49	47	36	4	—
,, S.E.	13	25	256	414	—	1	75	184	57	91	12	15
,, Central	8	19	176	176	1	—	56	110	88	75	2	—
Gorton	2	14	195	251	—	—	56	102	24	45	2	—
,, East	5	36	153	338	—	1	35	26	17	32	17	6
,, South	2	39	66	194	3	—	27	49	20	44	22	15
,, West	5	14	160	245	1	1	34	46	16	38	2	—
Ardwick—North	5	10	242	359	—	—	1	3	27	13	2	—
,, South	9	71	195	290	1	3	5	24	33	37	1	2
,, East	6	28	206	282	—	—	24	36	27	63	33	18
,, Central	7	8	130	192	—	—	2	—	13	10	4	—
Openshaw	6	79	103	197	3	—	24	42	66	65	12	—
Miles Platting	21	101	119	458	—	—	9	23	19	41	2	—
Newton	11	13	—	1	—	—	—	—	5	15	—	—
Newton—East	7	26	386	483	2	1	9	12	49	56	1	—
Monsall—West	4	27	283	222	4	1	31	37	60	87	—	—
,, East	4	29	45	351	—	1	13	23	5	19	—	—
Beswick	10	30	201	312	3	1	9	2	17	44	8	—
Bradford	22	61	201	322	—	1	13	6	58	40	5	2
Longsight	—	3	209	376	—	—	42	58	14	34	22	9
Harpurhey	4	16	231	528	1	2	59	115	35	48	6	1
Blackley	—	3	246	477	1	1	15	23	6	14	4	—
District I.	5	56	119	235	1	—	11	18	20	32	14	14
,, II.	21	47	165	320	—	3	36	36	29	44	1	—
Clayton	7	22	259	572	—	—	10	34	31	75	—	—
Moston	—	—	337	644	—	7	8	40	33	49	6	—
Moss Side	—	—	23	501	—	3	36	42	31	20	33	24
Rusholme	—	2	352	561	1	—	28	30	45	50	16	5
Kirkmanshulme	—	—	402	480	1	—	21	25	30	51	1	—
Withington	—	5	3	5	—	—	7	2	85	93	14	6
Gorton S.A.	2	4	59	36	—	—	2	1	—	5	—	—
Measles I.	—	—	860	1,198	17	14	72	145	296	276	7	1
,, II.	—	—	1,100	864	12	7	62	71	374	348	25	8
,, III.	—	—	763	729	8	7	219	214	354	384	22	19
,, IV.	—	—	1,121	1,087	10	—	84	50	436	407	12	5
,, V.	—	—	670	657	2	—	16	31	25	57	1	—
,, VI.	—	—	784	612	1	—	7	1	38	51	3	1
,, VII.	—	—	794	1,076	—	1	27	23	22	35	—	—
,, VIII.	—	—	724	659	—	—	6	16	42	52	2	1
TOTALS	360	1,542	16,187	23,464	83	84	1,712	2,652	3,350	4,377	458	255

DISTRICT	MISCELLANEOUS VISITS							TOTAL VISITS	REMARKS
	Sick Children	Visits "Out"	Visits *re* Relief	Inquests Investigated	Visits *re* Children suffering from Diarrhœa †	Visits to Expectant Mothers †	Neglected Children		
Ancoats—West	—	61	1	—	*11*	—	—	5,119	
,, North	—	37	3	—	*2*	—	—	7,121	
,, Central	—	4	3	—	—	—	—	5,935	
,, South	1	—	8	—	*1*	*2*	—	5,545	
,, East	—	37	3	—	*9*	—	—	4,949	
London Road	—	63	—	—	*7*	—	—	4,459	
St. George's North	—	1	10	—	—	—	—	4,150	
,, South	—	64	8	—	—	*1*	—	4,841	
,, East	1	14	—	—	—	—	—	5,828	
,, Central	—	51	—	—	—	—	—	5,798	
C.-on-M.—North	—	70	4	1	*24*	*6*	—	7,134	
,, South	—	33	1	—	*1*	—	—	5,041	
,, East	2	—	—	—	*1*	—	—	4,898	
,, West	—	2	—	1	*1*	—	—	5,222	
Hulme—East	—	5	17	1	—	—	—	6,256	
,, West	—	98	7	—	*21*	—	—	4,684	
,, North	—	25	6	—	—	*1*	—	4,887	
,, South	—	—	11	—	—	—	—	5,894	
,, S.E.	—	109	—	—	*1*	—	—	6,143	
,, Central	—	25	8	—	—	*42*	—	5,538	
Gorton	1	112	—	3	—	—	1	4,888	
,, East	5	52	1	—	—	—	—	4,192	
,, South	—	96	—	—	—	—	—	4,019	
,, West	—	43	—	—	*18*	—	—	3,444	
Ardwick—North	—	4	3	—	—	*6*	—	5,216	
,, South	1	48	1	—	—	—	—	5,358	
,, East	—	81	3	—	—	—	—	5,579	
,, Central	—	6	—	1	—	*19*	—	3,532	Vacant for three months.
Openshaw	3	25	4	—	*1*	*2*	—	4,419	
Miles Platting	—	31	16	—	*1*	—	1	5,513	
Newton	—	4	1	—	—	—	—	1,735	Vacant for seven months.
Newton—East	—	—	—	—	—	—	—	5,318	
Monsall—West	—	15	—	—	*1*	—	—	5,045	
,, East	—	9	1	—	*1*	—	—	3,387	Vacant for three months.
Beswick	32	71	7	—	*2*	*1*	—	5,001	
Bradford	2	27	14	—	*3*	—	—	4,178	
Longsight	—	71	8	—	—	—	—	4,316	
Harpurhey	—	37	—	—	—	—	—	5,560	
Blackley	—	112	—	1	—	—	—	4,351	
District I.	—	—	2	3	—	*3*	—	4,781	
,, II.	11	5	6	—	*2*	—	—	5,230	
Clayton	—	3	1	—	—	—	—	4,798	
Moston	—	2	1	—	*1*	—	—	4,614	
Moss Side	—	28	1	1	—	—	—	4,000	
Rusholme	1	137	—	—	—	—	—	4,496	
Kirkmanshulme	—	—	—	—	*1*	—	—	4,164	
Withington	2	169	1	—	—	—	—	2,942	
Gorton S.A.	—	—	—	—	—	—	—	1,279	Vacant for nine months.
Measles I.	92	538	14	—	—	—	—	4,400	
,, II.	2	447	43	—	—	—	—	5,040	
,, III.	4	548	10	—	—	—	—	5,363	
,, IV.	1	335	11	—	—	—	—	5,912	
,, V.	—	89	—	—	—	—	—	1,841	
,, VI.	—	42	8	—	—	—	—	2,208	
,, VII.	—	—	—	—	—	—	—	2,283	
,, VIII.	—	—	—	—	—	—	—	1,859	
TOTALS	161	3,886	267	12	*113*	*86*	2	259,703	

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† Miscellaneous visits: Figures in italics represent records of advice given to expectant mothers, and of the occurrence of cases of Infantile Diarrhœa. They are not to be counted in the total visits.

‡ The excess of Primary visits over the number of births is to be accounted for (*a*) by the number of "found cases" seen for the first time by the Health Visitor during the year; and (*b*) by the removal of infants from the address where the birth took place, usually to some other district prior to the Health Visitor's visit, in which case two Health Visitors have claimed a primary visit each in respect of only one birth.

TABLE 3.

DISTRICT	Number of Health Visitors working in the District	Number of Deaths of Children under one year of age	CAUSES OF DEATH—1923. CHILDREN UNDER 12 MONTHS. Bronchitis and Pneumonia	Prematurity	Debility and Marasmus	Enteritis	Convulsions	Tuberculosis	Syphilis	Accidental Deaths, including Want of Attention at Birth	Influenza	Measles	Whooping Cough	Other Causes
Ancoats	5	123	35	22	7	27	4	2	..	1	..	..	8	17
Central—London Road	1	30	10	5	1	3	4	..	..	1	..	..	1	4
St. George's, including Monsall West	5	164	47	22	16	23	8	5	2	7	2	1	13	19
Chorlton-upon-Medlock	4	117	27	33	10	16	2	1	1	3	2	..	3	19
Hulme and Deansgate	6	152	47	21	16	22	7	6	1	2	2	2	4	22
Ardwick	4	80	24	18	3	9	6	1	1	2	..	1	4	11
Openshaw	1	35	8	8	3	3	..	..	..	..	..	..	..	13
West Gorton, including Longsight	2	44	12	8	1	4	3	1	1	2	2	..	2	9
Gorton..	3	65	15	16	..	6	9	..	..	..	1	2	1	15
Beswick	1	21	7	2	1	1	4	..	1	..	..	..	3	2
Newton, including Miles Platting and Monsall East ..	4	90	24	22	10	4	2	1	..	..	..	..	11	15
Bradford	1	26	10	4	4	2	2	1	..	..	..	..	2	1
Harpurhey	2	18	4	3	2	2	1	..	..	..	1	..	..	4
Blackley	1	19	8	5	1	..	1	..	..	..	..	..	..	4
Special Districts	2	46	26	1	4	3	1	..	1	..	..	1	5	5
Clayton	1	36	12	11	3	..	..	1	..	1	..	..	2	6
Moston	1	30	7	5	5	2	5	..	..	..	..	..	1	5
Moss Side	1	36	8	9	..	3	3	..	1	..	1	1	..	10
Rusholme	1	32	3	5	3	3	2	..	..	1	1	1	2	11
Kirkmanshulme and Levenshulme	1	25	5	7	1	..	2	..	..	..	1	..	..	9
Withington	1	12	1	4	..	2	3	..	..	..	..	..	..	2
Total	48	1,201	340	231	91	135	69	19	9	20	13	9	62	203

TABLE 3A.

District	Number of Health Visitors working in the District	Number of Deaths of Children under one year of age	Causes of Death—1924. Children under 12 Months.											
			Bronchitis and Pneumonia	Prematurity	Debility and Marasmus	Enteritis	Convulsions	Tuberculosis	Syphilis	Accidental Deaths, including Want of Attention at Birth	Influenza	Measles	Whooping Cough	Other Causes
Ancoats	5	153	44	36	12	16	3	5	1	3	..	7	4	22
Central—London Road	1	28	8	5	4	4	..	1	..	1	..	1	..	4
St. George's, including Monsall West	5	142	33	27	18	15	6	2	3	2	1	14	3	18
Chorlton-upon-Medlock	4	153	41	29	18	14	5	1	6	3	2	5	4	25
Hulme and Deansgate	6	203	61	26	20	20	17	4	3	1	3	7	12	29
Ardwick	4	107	31	16	9	13	5	3	..	4	..	3	1	22
Openshaw	1	44	15	8	2	4	4	..	..	1	..	..	..	10
West Gorton, including Longsight	2	38	5	10	1	2	2	1	1	1	..	4	3	8
Gorton	3	74	20	21	6	6	2	..	..	2	..	2	1	14
Beswick	1	19	7	5	1	1	..	..	..	..	..	1	..	4
Newton, including Miles Platting and Monsall East	4	80	18	14	11	10	4	..	1	..	..	6	1	15
Bradford	1	34	6	5	3	5	3	..	1	5	..	3	..	3
Harpurhey	2	23	6	1	3	3	1	1	..	1	..	1	..	6
Blackley	1	25	3	7	4	2	2	2	..	..	..	..	..	5
Special Districts	2	55	12	9	11	7	..	2	..	..	..	2	2	10
Clayton	1	36	8	8	8	1	..	..	1	..	..	2	1	7
Moston	1	41	6	14	6	2	1	2	..	..	..	2	..	8
Moss Side	1	31	8	8	2	..	2	2	1	1	..	..	..	7
Rusholme	1	33	9	6	..	2	3	..	..	..	..	2	1	10
Kirkmanshulme and Levenshulme	1	39	12	8	2	4	2	..	1	1	..	3	1	5
Withington	1	17	4	5	..	2	..	..	..	..	..	1	..	5
Total	48	1,375	357	268	141	133	62	26	19	26	6	66	34	237

TABLE 4.

DISTRICT	Number of Health Visitors working in the District	Number of Deaths among Children 1 to 5 years of age	CAUSES OF DEATH—1923. CHILDREN ONE TO FIVE YEARS.										
			Bronchitis and Pneumonia	Debility and Marasmus	Enteritis	Convulsions	Tuberculosis	Syphilis	Accidental Deaths	Influenza	Measles	Whooping Cough	Other Causes
Ancoats	5	76	39	..	7	1	2	..	2	..	4	15	6
Central—London Road	1	16	9	..	2	..	2	..	1	..	..	..	2
St. George's, including Monsall West	5	109	38	2	9	5	11	..	1	2	5	23	13
Chorlton-upon-Medlock	4	53	21	3	2	..	5	..	..	2	10	4	6
Hulme and Deansgate	6	109	45	..	6	2	7	..	2	1	21	10	15
Ardwick	4	55	26	..	3	1	5	..	3	2	6	5	3
Openshaw	1	12	5	..	2	..	3	..	..	..	..	1	2
West Gorton, including Longsight	2	18	6	..	2	1	1	..	2	..	..	1	5
Gorton..	3	38	14	..	2	3	1	..	3	1	4	6	4
Beswick	1	23	13	..	3	1	..	..	1	..	1	3	1
Newton, including Miles Platting and Monsall East ..	4	70	30	1	6	1	2	..	..	1	4	16	9
Bradford	1	19	9	..	..	1	1	..	1	..	..	5	2
Harpurhey	2	10	5	..	..	..	1	..	..	..	..	1	3
Blackley	1	6	3	..	..	..	..	..	..	..	..	1	2
Special Districts	2	42	18	..	1	..	3	..	1	1	4	6	8
Clayton	1	16	6	1	1	..	1	..	1	..	..	2	4
Moston	1	14	3	..	1	..	5	..	..	1	..	3	1
Moss Side	1	10	4	..	2	1	1	..	..	1	..	1	..
Rusholme	1	9	1	..	2	..	1	..	..	..	1	..	4
Kirkmanshulme and Levenshulme	1	12	4	..	..	..	3	..	..	..	..	1	4
Withington	1	..	..	..	..	..	..	..	..	..	..	..	..
Total	48	717	299	7	51	17	55	..	18	12	60	104	94

TABLE 4A.

DISTRICT	Number of Health Visitors working in the District	Number of Deaths among Children 1 to 5 years of age	Causes of Death—1924. Children One to Five Years.										
			Bronchitis and Pneumonia	Debility and Marasmus	Enteritis	Convulsions	Tuberculosis	Syphilis	Accidental Deaths	Influenza	Measles	Whooping Cough	Other Causes
Ancoats	5	119	53	3	2	2	7	..	3	1	34	3	11
Central—London Road	1	14	7	..	1	..	..	..	..	..	3	1	2
St. George's, including Monsall West	5	122	51	5	4	..	7	1	5	..	32	7	10
Chorlton-upon-Medlock	4	102	34	1	10	2	9	1	3	2	20	8	12
Hulme and Deansgate	6	186	96	3	5	1	10	..	6	3	33	12	17
Ardwick	4	85	32	1	4	1	8	1	2	1	20	5	10
Openshaw	1	21	9	..	..	..	2	..	1	..	3	3	3
West Gorton, including Longsight	2	21	8	..	..	1	3	..	..	2	4	..	3
Gorton	3	57	19	1	1	4	3	..	2	..	12	6	9
Beswick	1	25	7	1	..	..	1	..	5	..	6	2	3
Newton, including Miles Platting and Monsall East ..	4	60	17	..	1	1	7	..	..	2	22	2	8
Bradford	1	27	8	1	2	1	3	..	1	..	5	1	5
Harpurhey	2	26	8	1	..	..	3	..	1	1	3	6	3
Blackley	1	7	1	1	..	..	2	..	1	..	1	1	..
Special Districts	2	57	17	1	1	..	5	..	..	1	19	5	8
Clayton	1	17	6	..	..	..	2	..	..	..	7	..	2
Moston	1	16	4	..	..	1	2	..	..	1	7	1	..
Moss Side	1	17	5	..	..	..	3	..	1	1	4	..	3
Rusholme	1	12	3	1	2	..	1	..	..	..	3	1	1
Kirkmanshulme and Levenshulme	1	14	2	..	1	..	2	..	..	1	4	..	4
Withington	1	4	2	..	..	..	..	..	..	..	..	1	1
Total	48	1,009	389	20	34	14	80	3	31	16	242	65	115

TABLE 5.

SUMMER DIARRHŒA. CASES VISITED BY THE HEALTH VISITORS, 1923 AND 1924 (CHILDREN UNDER 5 YEARS OF AGE)

Year	Total Number of Cases Visited	Number of Cases Occurring in			Districts																						Number Affected under one year of age	Method of Feeding at Onset of Illness			Deaths		
		July (15th-31st)	August	September	Ancoats	London Road	St. George's and Monsall	Ardwick	Hulme and Deansgate	Chorlton-upon-Medlock	Beswick	Bradford	West Gorton and Longsight	Gorton	Openshaw	Miles Platting	Newton	Blackley	Harpurhey	Special Districts	Clayton	Moston	Moss Side	Rusholme	Kirkmanshulme, Etc.	Withington		Breast	Mixed	Hand	Total Number	Number under one year of age	Number under four months of age
1917	636	115	335	166	116	18	131	43	90	31	34	39	32	12	18	11	15	..	..	..	..	..	..	..	..	..	325	68	64	194	129	90	..
1918	313	51	179	83	42	16	28	32	77	23	11	7	5	29	19	10	12	1	..	1	..	..	..	..	..	..	175	43	31	101	42	28	..
1919	174	23	108	43	17	13	17	17	39	17	1	19	5	7	5	3	6	2	1	..	..	..	..	..	..	..	100	24	22	54	53	42	32
1920	216	27	78	111	35	8	22	22	41	12	3	6	8	25	7	3	9	1	4	10	..	..	..	..	..	..	124	34	20	70	52	41	18
1921	730	152	357	221	76	30	119	63	128	35	9	82	19	37	15	12	16	3	21	42	15	11	1	..	..	..	387	96	65	226	117	96	42
1922	71	15	31	25	4	1	14	7	10	8	2	3	3	3	1	..	3	..	2	10	..	..	..	..	..	..	51	16	7	28	17	14	9
1923	228	39	93	96	22	13	31	19	49	37	3	2	7	14	5	3	1	1	6	9	..	..	3	2	1	..	113	31	16	66	29	25	12
1924	168	37	67	64	36	4	17	15	21	22	1	6	3	12	4	4	..	2	2	7	..	3	2	4	1	2	93	30	16	47	38	31	19

TABLE 2.

SHOWING THE WORK DONE BY THE HEALTH VISITORS DURING THE YEARS 1923–1924 AND COMPARING IT WITH THE WORK DONE IN 1920, 1921, AND 1922.

Classification of Visits	Number of Visits Paid in 1920	Number of Visits Paid in 1921	Number of Visits Paid in 1922	Number of Visits Paid in 1923	Number of Visits Paid in 1924
mary visits to Infants	15,532	17,677	14,838	14,901	13,928
bsequent visits to Infants	55,941	66,640	50,699	59,923	50,965
bsequent visits to Children over year of age and under 5 years	71,479	99,786	106,021	129,523	132,254
her visits *re* Infants and Young Children	1,270	1,182	725	424	345
use to House Inspection	3,701	....	....	....	....
ecial visits *re* Sanitary Defects	1,889	1,547	1,629	2,161	1,551
sits *re* Limewashing	2,284	2,778	2,679	2,648	1,752
imary visits to Verminous Cases (including Scabies)	704	631	471	550	470
bsequent visits to Verminous Cases	1,724	2,085	1,621	2,066	1,663
asles Investigations	9,700	1,124	17,909	3,360	16,187
bsequent visits	17,710	1,639	26,160	6,064	23,464
rman Measles Investigations	98	249	91	83	83
bsequent visits	119	408	149	109	84
hooping Cough Investigations	2,302	4,114	2,111	3,629	1,712
bsequent visits	4,726	8,165	3,574	5,685	2,652
sits *re* Relief	406	478	509	280	267
sits *re* Influenza	519	235	970	889	713
sits *re* Pneumonia	3,058	4,685	7,396	6,949	7,727
sits "Out"	19,571	21,595	17,270	5,716	3,886
ecial Investigations	495	3,739	248	....	....
Total visits	213,228	238,757	255,070	244,960	259,703
umber of Health Visitors	52 (4 Health Visitors doing only Measles, Whooping Cough, and Pneumonia Cases)	52 (4 Health Visitors doing only Measles, Whooping Cough, and Pneumonia Cases.)	52 (4 Health Visitors doing only Measles, Whooping Cough, and Pneumonia Cases)	52 (4 Health Visitors doing only Measles, Whooping Cough, and Pneumonia Cases)	52 (4 Health Visitors doing only Measles, Whooping Cough, and Pneumonia Cases)
umber of Districts worked	45 (7 temporary Measles Visitors also worked for three months)	46	47 (3 temporary Measles Visitors also worked for four months)	48	48 (4 temporary Measles Visitors also worked for four months)

REPORT ON THE WORK OF THE MIDWIVES' DEPARTMENT FOR THE YEARS 1923 and 1924.

By Dr. M. A. C. Douglas Drummond.

Inspection of Midwives.

Under the direction of Dr. Douglas Drummond the inspection of midwives has been carried on by Miss A. Austin.

Year	No. of Midwives who notified intention to practice	No. practising in City but resident outside	No. of Midwives who				No. of Births attended by Midwives	No. of Births registered	% attended by Midwives
			Died	Removed from Area	Gave up work	Were removed from Roll			
1923	186	25	1	15	5	..	10,141	15,388	66
1924	200	26	1	6	3	2	8,834	14,691	60

	1923	1924
No. of visits paid	720	730
,, midwives interviewed	264	307
,, houses found dirty	3	5
,, bags found unsatisfactory	6	8
,, Registers found unsatisfactory ..	8	8

PUERPERAL INFECTION.

During the year 1923, against an average of 109 cases in the eighteen years 1905-22, 130 cases of puerperal infection were notified, of which 33 occurred after abortion or premature labour. The figures for 1924 were 115 cases, and 29 occurred after abortion, etc. Of the 62 abortions in the two years, 33 were at the second or third months of gestation, 9 at the fourth month, 4 at the fifth, 8 at the sixth, 6 at the seventh, and 2 during the eighth month of pregnancy.

The total fatal cases numbered 21 in 1923 and 24 in 1924, of which 7 and 4 respectively were connected with premature labours, as against an average of 25 in the eighteen years 1905-22.

The attack-rate per 1,000 births was 8·44 in 1923, and 7·15 in 1924, against 8·20 in 1922, whilst the case fatality per cent, was 16·2 and 20·9 respectively, against 22·4, the average for the years 1905-1922.

The mortality from puerperal fever per 1,000 births was 1·36 in 1923 and 1·63 in 1924, against an average of 1·51 in the preceding 10 years.

Table relating to the cases of puerperal fever attended either by midwives or doctors during 1923 and 1924, as compared with the average of the eighteen years, 1905-1922 :—

Years	Number of Cases attended by					
	Midwives		Doctors		Midwife and Doctor	
	Attacks	Deaths	Attacks	Deaths	Attacks	Deaths
1905-1922 ...	39	7	52	15	25	6
1923	38	7	75	12	17	2
1924	30	3	65	16	20	5

Out of 130 cases notified in 1923, 15 patients were nursed at home, and 11 recovered ; 99 cases were removed to Monsall Hospital, and 88 recovered, the case mortality being 11·1 per cent. The remaining 16 cases were treated in other institutions, and 10 recovered.

During 1924 there were 115 cases notified. Eleven patients were nursed at home and 9 recovered. 95 cases were removed to Monsall Hospital and 78 recovered. The case-mortality being 17·9 per cent.

The remaining 9 cases were treated in other institutions, and 4 recovered.

In 1923-24 subsequent visits have been paid to 137 women who recovered, and, with the exception of 13, all were in good health.

The particulars as to the character of the labour and the results for 1923-24 are :—

	No. of Cases		Recovery		Death	
	1923	1924	1923	1924	1923	1924
Normal full term labour	74	51	63	43	11	8
Abnormal full term labour	23	33	20	22	3	11
Abortion or premature	33	31	26	26	7	5

MATERNAL DEATHS.

During the year 1924, 39 maternal deaths from causes other than puerperal sepsis were notified. The causes given are set out in the following table :—

Dystocia, obstetric shock ..	10	Ruptured uterus	2
Eclampsia	7	Placenta praevia	1
Hyperemisis gravidarum ..	5	Ruptured ectopic	1
Abortions	6	Ruptured pyosalpinx	1
Pulmonary embolism	3	Puerperal mania	1
Cerebral hæmorrhage	2		

Careful investigation was made into the circumstances relating to the death in each of the above cases.

SUSPENSION OF MIDWIVES.

During 1923, 153 suspensions of midwives from their work occurred, chiefly on account of their having been in attendance on cases of puerperal infection or other septic conditions. The number of suspensions for 1924 was 149.

RECORDS OF CALLING IN MEDICAL AID.

During the year 1924 the number of medical records received was 3,485, as compared with 3,468 in the previous year. The numbers under the various reasons given for having advised medical aid correspond to those in previous years (see table on next page).

Number of Cases occurring in 1923–24 in which the Midwife advised that a Registered Medical Practitioner should be sent for (Rule E). Also the Number of Appications from Medical Practitioners for Payment of their Fees for Attending Certain Emegency Cases.

Period	Medical aid called in on account of the following causes, as stated by the Midwife			Total		Application for Fees	
				1923	1924	1923	1924
Pregnancy	Abortions, miscarriages			20	22	6	10
	Deformed pelvis			12	13	—	4
	Loss of blood			14	24	—	7
	Other unusual features of pregnancy			105	133	5	32
Labour	Presentations	Head—Malpositions		32	17	12	15
		Breech	In primiparæ	10	14	2	3
			In multiparæ	8	6	2	2
			Para not stated	31	26	17	20
		Transverse		8	8	3	11
		Funis		19	23	7	7
		Unable to make out		19	31	5	3
		Footling		9	12	5	6
		Hand		8	14	2	6
	Tedious labour	Forceps used		1	1	210	236
		No record as to forceps		527	556	86	76
	Placenta	Retained		43	46	27	30
		Adherent		40	14	12	19
		Prævia		12	4	4	6
	Membranes retained			24	12	10	6
	Rupture of perineum			800	696	290	276
	Hæmorrhage	Ante partum		84	74	45	34
		Post partum		43	40	27	28
		Hæmorrhage—3rd stage		—	11	2	—
	Convulsions			4	—	5	2
	Complications			84	83	32	19
	Premature labour			17	9	6	2
Lying-in	Abdominal swellings			—	4	—	—
	Foul-smelling discharges			2	—	—	—
	Secondary post-partum hæmorrhage			7	4	—	1
	Rigor			—	2	—	—
	Rise of Temperature above 100·4° F			57	67	17	21
	Unusual swelling of breasts			8	15	2	9
	Progress unsatisfactory or complications			277	286	72	73
Newly-born Child	Injuries received during birth			1	1	—	—
	Obvious malformations			53	56	7	17
	Tongue-tied			67	91	6	25
	Feebleness of child			164	156	60	55
	Inflammation of eyes and eyelids			399	409	105	115
	Skin eruption			79	69	22	16
	Illness from prematurity			90	80	14	41
	Jaundice			61	64	11	17
	Inflammation about the umbilicus			26	32	3	8
	Unspecified or complications			169	230	21	39
	Convulsions			34	15	15	2
	Totals			3,468	3,470	1,177	1,299

* These applications have been classified according to the conditions requiring treatment found by the medical practitioner.

MIDWIVES ACT, 1918—MEDICAL ASSISTANCE TO MIDWIFE IN CASE OF EMERGENCY.

Under Section 14 (1) of this Act a midwife is required, in case of any emergency as defined in the rules, to call in to her assistance a registered medical practitioner, and the local supervising authority is required to pay such medical practitioner a fee as prescribed by the Ministry of Health. The local supervising authority has power to recover the fee from the patient or husband unless they are unable, by reason of poverty, to pay such fee.

Particulars of applications from medical practitioners for the payment of their fees :—

	1923	1924
No. of families whose incomes were below the scale	453	354
No. of families whose incomes were above the scale	673	869
No. of families who paid doctor themselves ..	40	51
Conditions not fulfilled	11	14
No. awaiting investigation	—	11
No. paid by Local Supervising Authority ..	1,126	1,223
	£ s. d.	£ s. d.
Amount of fees paid	1,352 10 0	1,297 12 0
Amount recovered from people who were in a position to pay	447 19 5	478 4 0
No. of applications for fees received from midwives	7	13
No. paid	5	10
Amount paid to midwives	£3 2 6	£6 7 6

STILL-BIRTHS.

	No. reported	No. in practice of		Percentage to Total Births
		Doctors	Midwives	
1923	577	353	224	3·8
1924	472	306	166	3·2

The summary of causes to which it seemed reasonable to credit the still-births shows the principal numbers to be :—

	1923	1924
Definite history of ill-health of the mother	73	58
Accident to the mother before confinement	30	29
Congenital deformities	7	8
Shock	9	8
Probable drug-taking to procure abortion	4	..
Breech presentations, full time and premature	22	15
Employment of mother	8	4
Ante-partum hæmorrhage..	7	6
Insufficient help at delivery	11	6
Probable specific disease from family history	3	5
Twin pregnancies—full time and premature	15	4
Abnormal presentations	4	4

In 1923 the still-birth rate was highest in Ancoats, Openshaw, Gorton, and Chorlton-upon-Medlock, and in 1924 in Ardwick, Hulme, Gorton, and Ancoats.

DEATHS OF NEW-BORN CHILDREN.

Notifications of 18 deaths of new-born children before a medical practitioner could be obtained were received and investigated during 1923. In 9 instances inquests were held. In 2 cases " Want of attention at birth " was the verdict, natural causes 4, and in 3 " Accidental suffocation." In 9 cases the City Coroner did not consider it necessary to hold inquests.

The number of notifications received during 1924 was 18. In 17 instances inquests were held. In 5 cases " Want of attention at birth " was the verdict, asphyxia 4, accidental suffocation 1, natural causes 7, and in 1 case no inquest was considered necessary.

CHARGES OF MALPRACTICE, NEGLIGENCE, OR MISCONDUCT.

It was not necessary to report any case of negligence on the part of midwives during the year 1923.

During the year 1924, 3 midwives were summoned to appear before the Maternity and Child Welfare Sub-Committee, to answer charges of negligence. The Committee found it necessary in the case of one of these midwives to make a report under this heading to the Central Midwives Board for being guilty of misconduct, having been the worse for drink whilst in attendance at a confinement. The midwife was removed from the roll.

UNCERTIFIED MIDWIVES.

Under the Midwives Acts, 1902 and 1918, the Maternity and Child Welfare Sub-Committee during the year 1924 prosecuted an uncertified midwife on a charge of attending four cases of confinement—no doctor being engaged or present at delivery. A fine of £5 was imposed.

WORK OF THE SPECIAL NURSES.

The work done by the nurses during the years 1923-24 has been tabulated, and is as follows:—

	1923	1924
Still-births investigated	227	166
Deaths of newly-born infants investigated	18	18
Cases of Puerperal Fever nursed at home	14	12
Nursing visits paid to Puerperal Fever cases and to patients with raised temperatures	395	600
Old Puerperal Fever cases investigated to ascertain subsequent histories	133	82
New Puerperal Fever cases investigated to ascertain histories	120	106
Nursing visits paid to cases of Mammary Abscess.. ..	135	241
,, ,, ,, Phlebitis	68	54
,, ,, ,, houses infected with Chicken Pox	3	—
,, ,, ,, houses infected with Scarlet Fever	11	24
,, ,, ,, houses infected with Erysipelas	4	16
,, ,, ,, houses infected with Diphtheria	21	11
,, ,, ,, houses infected with Measles	29	110
Number of cases of skin affection in newly-born infants ..	105	114
Nursing visits paid to these infants	1,146	952
Number of nursing visits paid to cases of Spina Bifida..	149	106
,, ,, ,, ,, cases of Septic and unsatisfactory Umbilicus	693	526
,, ,, ,, ,, cases of Ophthalmia Neonatorum	68	475
Special investigation visits concerning medical records, including visits paid to doctors and others	942	386
Special investigations into births..	333	370
,, ,, ,, maternal deaths	4	30
Nursing visits paid for midwives during suspension and when unable to obtain a qualified substitute	45	22
Unclassified nursing visits paid to mothers and infants ..	69	127
	4,732	4,548

Statement of Work done at the Child Welfare Centres during the Years 1923 and 1924.

		72, Rosamond Street West, C.-on-M.	1, Manipur Street, Openshaw	135, Pollard Street, Ancoats	93, Hamilton Street, Collyhurst	230, Hyde Road, West Gorton	153, Cheetham Hill Road	42, Lower Moss Lane, Hulme	45, Higher Ardwick	Abbey Hey Lane, Gorton	686, Oldham Road, Newton Heath	Jubilee Schools, Harpurhey	Elm Street	Holy Name	Total
Number of weighings of Babies	1923	14,883	27,749	12,387	15,652	18,912	9,006	8,236	15,267	4,219	10,620	9,319	2,813	1,724	150,787
	1924	14,485	24,701	11,323	14,393	15,955	9,161	8,284	16,749	4,470	11,655	9,624	3,094	1,887	145,781
Number of New Cases	1923	837	1,183	635	846	1,006	429	429	740	175	535	432	139	125	7,511
	1924	839	1,055	564	731	804	458	404	752	215	484	365	191	154	7,016
Number of Consultations	1923	5,576	10,152	4,819	7,401	8,413	4,319	3,842	5,945	1,713	4,911	4,319	1,241	885	63,536
	1924	5,771	10,478	4,246	6,606	6,984	4,023	3,366	6,722	1,670	5,376	4,357	1,230	916	61,745
Number of attendances for Massage	1923	1,139	2,386	867	2,106	1,207	976	664	1,219	—	1,057	572	—	—	12,193
	1924	1,154	2,633	1,084	1,914	1,245	966	690	1,257	—	1,070	569	—	—	12,582
Visits to Homes by Superintendents	1923	494	877	951	923	1,513	1,179	1,137	429	329	1,181	612	187	3,541	13,353
	1924	337	1,036	1,187	741	1,024	1,263	928	482	214	1,145	633	361	3,686	13,037
Number of individuals who attended Centres	1923	1,401	2,247	1,150	1,448	1,711	859	745	1,175	319	948	764	227	223	13,227
	1924	1,439	2,078	1,053	1,322	1,562	889	698	1,262	385	986	916	292	133	13,015
Number of Attendances at Pre-maternity Clinics	1923	169	340	113	227	149	169	123	303	—	159	—	—	—	1,752
	1924	151	261	83	132	141	153	80	282	—	120	—	—	—	1,403
Number of Attendances at Dental Clinic	1923	501	—	—	—	—	—	—	—	—	—	—	—	—	501
	1924	564	—	—	—	—	—	—	—	—	—	—	—	—	564
Number of Attendances at Venereal Disease Clinics	1923	—	—	—	—	—	—	449	655	—	—	—	—	—	1,104
	1924	—	—	—	—	—	—	370	571	—	—	—	—	—	941

PROVISION OF MILK FREE OR AT REDUCED COST DURING THE YEARS 1923 and 1924.

STATEMENT SHOWING NUMBER OF CASES RECEIVING MILK, AMOUNT SOLD, COST, AND MODE OF DISTRIBUTION.

		CENTRES	70–72, Rosamond Street West	1–3, Manipur Street	153, Cheetham Hill Road	135, Pollard Street	93, Hamilton Street	230, Hyde Road, West Gorton	40–42, Lower Moss Lane	45, Higher Ardwick	Jubilee Schools, Harpurhey	686–8, Oldham Rd., Newton	375, Abbey Hey Lane	Elm Street School	Didsbury	Levenshulme	Rusholme	Chorlton-cum-Hardy	TOTAL
Number of New Cases put on Milk	1923	Fresh Milk	148	446	73	242	364	233	115	234	67	90	35	44	6	32	28	—	2,157
		Dried ,, ...	72	134	21	71	157	88	50	125	26	66	15	32	—	13	10	—	880
		Total	220	580	94	313	521	321	165	359	93	156	50	76	6	45	38	—	3,037
	1924	Fresh Milk	149	334	69	164	221	149	106	186	88	57	54	54	3	33	50	7	1,724
		Dried ,, ...	70	139	22	118	112	93	40	125	30	48	26	38	—	16	15	—	894
		Total	219	473	91	282	333	242	146	311	118	105	82	92	3	49	65	7	2,618
Total Number having Milk	1923	Fresh Milk	2,878	11,703	2,444	4,974	5,971	6,324	2,065	3,750	1,516	1,401	1,624	584	174	453	608	108	46,577
		Dried ,, ...	2,352	3,903	793	2,317	3,778	2,565	967	2,463	685	1,246	686	505	—	123	305	—	22,688
		Total	5,230	15,606	3,237	7,291	9,749	8,889	3,032	6,213	2,201	2,647	2,310	1,089	174	576	913	108	69,265
	1924	Fresh Milk	2,423	7,333	1,997	3,365	4,223	4,404	2,165	4,638	1,748	1,069	1,428	560	128	558	1,038	75	37,152
		Dried ,, ...	1,693	3,362	572	2,360	2,673	2,196	1,075	3,320	658	852	701	453	—	136	893	—	20,944
		Total	4,116	10,695	2,569	5,725	6,896	6,600	3,240	7,958	2,406	1,921	2,129	1,013	128	694	1,931	75	58,096
Amount of Milk being sold (Pints) or Lbs.)	1923	Fresh Milk (Pints) . .	20,349	81,660	17,217	34,809	41,836	44,355	14,465	26,187	10,626	9,878	10,979	4,088	1,218	3,177	4,246	768	325,858
		Dried ,, (Lbs.) . .	2,353	3,906	802	2,317	3,797	2,568	989	2,471	684	1,246	688	522	—	133	325	—	22,801
	1924	Fresh Milk (Pints) .	17,010	51,891	13,993	23,548	29,617	30,855	15,117	32,554	12,286	7,494	9,989	3,934	882	3,906	7,304	525	260,905
		Dried ,, (Lbs.) . .	1,711	3,388	583	2,361	2,713	2,196	1,143	3,502	661	856	702	451	—	138	971	—	21,376
Total Cost to Corporation			£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.
	1923	Fresh Milk	129 18 5	479 5 8	129 16 5	200 4 2	270 7 11	264 14 3	93 7 7	160 6 10	70 13 3	70 18 2	67 17 10	33 3 9	9 10 0	21 3 5	29 9 2	4 12 11	2,035 9 9
		Dried ,, ...	107 0 9	187 8 3	49 11 4	105 6 2	191 4 2	116 13 8	52 2 9	121 7 11	32 1 9	61 6 8	30 6 5	28 0 2	—	6 6 4	14 6 4	—	1,103 2 8
		Total	236 19 2	666 13 11	179 7 9	305 10 4	461 12 1	381 7 11	145 10 4	281 14 9	102 15 0	132 4 10	98 4 3	61 3 11	9 10 0	27 9 9	43 15 6	4 12 11	3,138 12 5
	1924	Fresh Milk	107 6 9	338 4 3	101 0 2	149 17 0	209 5 0	193 5 3	100 10 2	216 2 7	80 10 3	48 5 4	69 5 0	31 6 4	5 11 7	28 1 6	52 0 0	2 16 3	1,733 7 5
		Dried ,, ...	72 5 5	152 9 10	28 18 9	99 12 0	134 4 6	90 15 0	52 7 9	168 15 3	27 16 0	37 1 7	31 16 9	19 10 9	—	6 0 4	46 17 9	—	968 11 8
		Total	179 12 2	490 14 1	129 18 11	249 9 0	343 9 6	284 0 3	152 17 11	384 17 10	108 6 3	85 6 11	101 1 9	50 17 1	5 11 7	34 1 10	98 17 9	2 16 3	2,701 19 1

MATERNITY HOMES AND HOSPITALS.

Under the Manchester Corporation (General Powers) Act, 1921, provision has been made for the registration of maternity homes, and bye-laws have been made in accordance with Section 53 of the Act. The bye-laws were given in detail on pages 175-176 of the Annual Report for the year 1921.

During the year 1923 5 applications for registration were received; 2 of these were refused on the grounds of unsuitability of person and premises, 2 were withdrawn, and 1 was held in abeyance.

Since the Act came into force 19 homes have been registered and 2 discontinued for various reasons, leaving 17 homes on the register at the end of the year.

During 1924 4 applications for registration were received, and of these 2 were approved, 1 was refused, and 1 is held in abeyance. There are now 19 homes on the register.

In connection with 29 houses reported to have received maternity cases without having been registered for the purpose, legal proceedings were taken in 3 instances, and in each case a fine of 40s. and costs was imposed by the magistrates. In 12 other instances cautionary letters were sent by the Town Clerk. No action was found to be necessary in the other 14 cases.

SUMMARY OF WORK OF INVESTIGATORS FOR YEARS 1923 AND 1924.

No. of visits in connection with :—

Milk Investigations—New cases	1923 ..	4,617	8,495	17,959
	1924 ..	3,878		
„ „ Reinvestigations..	1923 ..	5,113	9,464	
	1924 ..	4,351		
Medical Fees—New cases	1923 ..	643	1,884	2,107
	1924 ..	1,241		
„ „ Reinvestigations	1923 ..	119	223	
	1924 ..	104		
Measles	1923 ..	—	1,322	1,322
	1924 ..	1,322		
Pneumonia..	1923 ..	—	—	—
	1924 ..	7	7	7
Whooping Cough	1923 ..	—	—	—
	1924 ..	1	1	1
Total visits 1923 .. 10,492; 1924 .. 10,904	= Total visits..			21,396

Centre Work :—

Superintendent's duties	1923 ..	—	39 days
	1924 ..	39 days	
Milk Clerk's duties	1923 ..	99 days	145½ „
	1924 ..	46½ „	
Office Work :—			
Clerical duties	1923 ..	37½ days	66 „
	1924 ..	28½ „	
Total days 1923 .. 136½ days; 1924 .. 114 „	= Total		250½ days

OPHTHALMIA NEONATORUM.

By Dr. M. A. C. Douglas Drummond.

During the year 1924 853 cases of inflammation of the eyes were notified from various sources, and visited by the Eye Nurses.

In the preceding year 836 cases were notified and visited.

Of these, 281 were cases of disease in children and adults. 185 suffered from simple conjunctivitis, 28 from blepharitis, 3 from keratitis, and 2 injury to eye; 30 were cases of corneal ulcer, 17 had nebula of cornea, and 3 hazy cornea; 2 children had lachrymal obstruction, 1 strabismus, 5 congenital cataract, 5 blind.

In 1923 there were 267 cases of disease in children and adults. Of these, 191 suffered from simple conjunctivitis, 13 from blepharitis, 12 from keratitis, 1 from iritis. Eleven cases of corneal ulcer, 24 had nebula of cornea, 2 hazy cornea which cleared, 11 strabismus, 1 glioma; 6 children had congenital cataract—2 of which had nystagmus, 2 congenital coloboma iris, 1 ecchymosis, and 1 paralysis and optic tumour.

In 1924 572 cases of inflammation of the eyes of newly-born children occurred; 336 were notified by the medical attendants (either private or at the Royal Eye Hospital) as cases of ophthalmia neonatorum. Of these, 32 were considered to be cases of simple conjunctivitis, leaving 304 true cases of ophthalmia neonatorum. The remaining 236 cases were notified by midwives.

The corresponding numbers for 1923 were:—

Cases of inflammation of the eyes of newly-born	569
Notified by medical attendants	381
Notified by midwives..	188

Swabs were taken from the conjunctiva in all cases where possible, and sent to the Public Health Laboratory to be examined bacteriologically for the presence of gonococcus. Fifty-four swabs were examined, and of these 11 gave a positive result. In 1923 57 swabs were examined, 14 of which gave a positive result.

Table A shows the distribution of cases, both as regards the districts in which they occurred and the month of the year. The cases in which the cornea was affected are also shown in this table.

In both 1924 and 1923 the largest number of cases of true ophthalmia neonatorum occurred in Hulme, St. George's, Chorlton-upon-Medlock, and Ardwick.

The monthly rate of notified cases varies considerably, and there seems no special reason for the rise and fall in numbers. August heads the list, followed by November, May, and June. In 1923, March, April, July, and May showed the highest rate.

TABLE A, 1923-1924.—NOTIFIED CASES OF OPHTHALMIA NEONATORUM, ALSO CASES REPORTED BY MIDWIVES BUT CONSIDERED TO BE CASES OF CONJUNCTIVITIS.

Month of Year	January		February		March		April		May		June		July		August		September		October		November		December		Total		Cases of Conjuncti-vitis reported by Midwives		Cases with Corneal Com-plications	
	1923	1924	1923	1924	1923	1924	1923	1924	1923	1924	1923	1924	1923	1924	1923	1924	1923	1924	1923	1924	1923	1924	1923	1924	1923	1924	1923	1924	1923	1924
Ancoats	3	1	3	4	7	1	2	4	1	5	3	—	2	1	1	—	1	3	3	1	1	6	1	—	28	26	11	15	—	—
Central	—	—	—	—	1	1	—	—	4	1	—	—	2	1	—	1	—	—	—	1	—	—	—	1	7	6	2	2	—	—
St. George's	4	3	4	4	4	6	3	1	4	1	3	4	11	—	5	5	—	6	2	2	4	2	—	4	45	38	56	66	—	—
Cheetham	2	1	1	1	3	—	2	1	2	4	1	2	2	1	1	2	—	2	1	1	—	2	2	1	16	18	5	11	1	1
Crumpsall	—	—	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	2	1	—	—	—	—
Blackley	1	1	—	—	—	—	1	1	1	—	2	—	—	—	—	—	—	—	—	1	—	—	—	—	5	3	1	1	—	—
Harpurhey	1	1	1	1	—	2	3	2	—	3	—	1	2	—	2	—	3	1	1	—	—	1	—	—	13	12	9	5	1	—
Moston	—	—	—	—	2	—	1	—	2	1	1	1	1	—	—	1	—	1	—	—	—	—	—	—	7	4	2	—	2	—
Newton Heath	2	3	7	1	3	—	5	3	2	1	1	2	1	2	—	—	2	2	—	1	—	—	—	4	23	19	5	29	—	—
Bradford	1	—	2	—	3	2	3	—	3	2	1	1	—	—	1	3	—	1	3	1	—	—	—	1	17	11	11	9	—	—
Beswick	2	—	—	—	1	2	1	—	1	1	—	1	1	—	3	1	—	—	1	—	—	2	2	1	12	8	10	13	—	—
Clayton	—	—	—	—	—	1	1	—	1	—	1	—	—	—	—	1	1	—	—	1	—	1	—	—	4	4	2	3	—	—
Ardwick	4	3	—	2	3	1	3	5	3	3	3	1	6	5	2	1	4	—	—	1	2	1	—	3	30	26	8	7	3	2
Openshaw	1	—	1	1	4	1	2	1	—	2	—	1	2	—	1	—	2	4	—	1	—	2	—	2	13	15	6	3	—	—
West Gorton	3	—	1	—	—	1	1	—	4	—	6	1	2	—	—	1	2	—	1	2	2	2	1	3	23	10	5	9	—	1
Rusholme	—	2	—	1	4	—	2	1	—	1	—	1	—	—	1	—	3	—	—	—	—	3	—	—	10	9	1	1	1	1
Chorlton-upon-Medlock	2	2	4	2	6	2	4	—	2	3	3	4	4	2	3	4	6	4	3	3	3	1	2	5	42	32	6	6	1	1
Hulme	5	1	5	4	7	3	3	2	4	4	7	6	8	6	2	5	2	3	3	4	5	2	—	4	51	44	29	28	1	2
Moss Side	—	3	—	—	1	2	3	1	1	—	1	4	1	—	1	2	1	1	—	1	1	2	—	1	10	17	3	2	—	4
Withington	—	—	—	1	1	—	—	1	—	—	1	1	—	—	—	—	—	—	—	1	—	2	—	—	2	6	1	—	—	—
Gorton	1	—	1	2	1	1	3	1	1	1	2	—	—	3	—	5	—	1	2	2	2	2	—	—	13	18	8	14	—	—
Levenshulme	—	1	1	1	—	—	1	2	3	—	1	1	—	—	—	1	—	3	2	—	—	—	—	—	8	9	7	2	—	—
Total	32	22	32	25	51	26	45	26	39	33	37	32	45	21	23	33	27	32	22	24	20	32	8	29	381	336	188	236	10	—
Cases with Corneal Complications ..	1	4	—	1	2	1	1	—	1	3	—	1	2	—	1	1	—	—	2	—	—	1	—	—	—	—	—	—	10	12

TABLE B—1923-1924. OPHTHALMIA NEONATORUM. HISTORY OF MOTHER.

	Age of Mother							Parity										Labour		Attendant not present at birth	No. of mothers having had previous cases of Ophth. Neon.	History of yellow discharge	Legitimacy	
	Under 20	20—	25—	30—	35 and Over	Not ascertained	Total	1	2	3	4	5	6	7	8	9+	Not Ascertained	Normal	Abnormal				Legit.	Illegit.
Corneal Cases, 1923	1	2	3	1	3	0	10	4	1	1	1	0	1	0	1	1	0	10	0	0	0	4	9	1
„ „ 1924	0	4	4	3	1	0	12	5	5	1	0	1	0	0	0	0	0	8	4	0	1	2	11	1
Notified Cases, 1923	18	74	117	61	68	43	381	101	87	61	40	32	24	12	10	14	0	363	18	19	26	32	372	9
„ „ 1924	8	71	108	82	57	10	336	105	89	50	28	27	11	11	6	7	2	291	45	16	23	38	324	12
Not Notified ...1923	11	45	57	33	30	12	188	47	41	29	26	14	9	7	3	12	0	178	10	23	30	1	186	2
„ „ ...1924	7	43	61	69	45	11	236	49	60	38	33	17	16	9	3	10	1	216	20	3	14	2	233	3

	1923	1924
Total cases notified	381	336
Total cases not notified	188	236
	569	572

TABLE C—1923-1924. OPHTHALMIA NEONATORUM.

	Interval in days between birth and onset											Attended by				Where treated			No Doctor	Total
	1	2	3	4	5	6	7	8	9	10+	Total	Midwife	Doctor	Midwife and Doctor	Total	Home	Out-Patients at Hospital	In-Patients at Hospital		
Notified Cases, 1923	70	30	30	27	21	23	32	13	27	108	381	373	95	13	381	198	179	4	0	381
,, ,, 1924	42	23	24	24	23	30	41	26	26	77	336	224	86	26	336	171	161	3	1	336
Not notified ... 1923	15	19	12	13	20	19	27	27	18	18	188	179	0	9	188	170	6	0	12	188
,, ,, 1924	13	19	15	14	27	29	25	32	36	26	236	213	2	21	236	217	10	0	9	236

	1923	1924
Total cases notified	381	336
Total cases not notified ...	188	236
	569	572

Table C shows the day of onset, the attendant at birth, and the place of treatment.

In 1924 the greatest number of onsets was on the first day of life, and in over one-half of the cases the first signs of disease appeared during the first five days.

These figures were the same in 1923. 171 of the cases were treated by private doctors and the remaining 164 by the doctors of the Royal Eye Hospital.

In 1923 198 cases were treated by private doctors and 183 by the Royal Eye Hospital.

In 12 instances there was involvement of the cornea, and of these 2 cases were admitted into the Royal Eye Hospital.

In 1923 there were 10 instances of involvement of the cornea, one of which was admitted into the Royal Eye Hospital.

The number of cases with corneal involvement was 12 in all, being an increase of 2 of last year.

Seven have completely recovered, 1 removed, and 1 died during treatment; 3 had nebula cornea, which will clear.

Of the 10 cases notified in 1923, 9 completely recovered, and one has nebula cornea, which is clearing.

TABLE D.—CASES WITH INVOLVEMENT OF THE CORNEA.

	1923	1924
Right Eye..	0	2
Left Eye	7	5
Both Eyes..	3	5
	10	12

Table E shows the results of the 336 cases of *true* ophthalmia neonatorum, and of the 236 of conjunctivitis in *newly-born infants,* together with 381 cases of ophthalmia neonatorum and 188 cases of conjunctivitis in 1923 :—

	Complete recovery		One Eye lost, other normal		One Eye lost, the other damaged		Both Eyes lost		Both Eyes damaged		One Eye damaged		Death before recovery		Removed before recovery		TOTALS	
	1923	1924	1923	1924	1923	1924	1923	1924	1923	1924	1923	1924	1923	1924	1923	1924	1923	1924
Ophthalmia Neonatorum	366	312	..	..	..	..	..	..	..	..	1	..	10	12	4	12	381	336
Conjunctivitis ..	178	233	..	..	..	..	..	..	..	..	..	..	6	3	4	..	188	236

Table F showing the total number of cases of ophthalmia and conjunctivitis in newly-born infants, and the percentage with corneal complications, 1911-1924 :—

Year	No. of Cases	Percentage with Corneal complications
1911	525	7·23
1912	667	11·39
1913	573	12·04
1914	681	9·25
1915	642	7·79
1916	620	6·13
1917	539	6·86
1918	567	8·64
1919	698	4·73
1920	974	4·83
1921	921	2·28
1922	760	1·84
1923	836	1·20
1924	853	1·41

FOOD POISONING.

During the year 1923, food poisoning was suspected in nine instances ; three were reported by the Coroner, two by the Police Department, two by medical practitioners, and two by other persons.

On investigation five proved not to be instances of food poisoning.

In none of the four remaining instances did death occur, and the illnesses were all comparatively mild.

In no instance was it bacteriologically or chemically proved that the illnesses complained of were due to the ingestion of the suspected food, although clinically and after careful investigation, the food stuffs remained under suspicion.

During 1924, food poisoning was suspected in five instances; two outbreaks were reported by the Coroner, and three by medical practitioners.

On investigation, the cause of the illnesses in three instances was found not to be due to food poisoning; in one of these cases the symptoms were due to eating the berries of the "Deadly Nightshade."

Of the two remaining outbreaks investigated, one was found to have been caused by mutton which was probably infected in the home, as no other illnesses of a similar nature could be discovered in the district. The organism isolated from the patients was B. Aertrycke (Mutton). Of the six persons who were ill, one, a child of three years, died.

In the other outbreak the food implicated was "sheeps head," but no organisms of the food poisoning group were isolated from the food of the patients.

Special Inspectors Report—1923 and 1924.

Infectious Diseases Enquiries :—	
Dysentery	23
Smallpox	3
Anthrax	13
Enteric fever	5
Paratyphoid	115
Scarlatina	16
Cancer	4
Contacts	11
Inspections of Milkshops	3,744
„ *Re* bogus milk businesses	21
„ Ice cream	150
„ Farms	14
„ Kez and smetany	130
„ Food shops and restaurants	295
„ Nuisances	515
„ Allotments and stables *re* flies	1,130
„ *Re* crickets	76
„ *Re* animalculæ in town's water	14
„ Samples ditto	6
„ Miscellaneous nuisances	199
Enquiries *re* Dyeing of furs	10
„ „ Acid calcium phosphate	7
Samples ditto	8
„ „ Soda fountains	5
Samples aerated water	3
„ town's water	2
„ „ Changing of bread	101

Milk samples	33
Police and coroner's court	22
Food poisoning	173
Berry poisoning	14
Gas poisoning	8
Specimens fœces, etc.	93
Housing statistics	412 days
Reports *re* dairies, cleansing, and overcrowding	99 ,,
Housing enquiry, Hulme area	89 ,,

REPORT OF THE SANITARY SECTION.

By Mr. J. Walton, Chief Inspector, and
Mr. H. B. South, Chief Clerk.

In presenting to the Medical Officer of Health the report of the work transacted in the Sanitary Section for the years ending 31st March, 1923 and 1924, we beg to state that the City, for inspection and other purposes, is divided into 35 Districts, to each of which one Sanitary Inspector has been assigned.

In addition to these there is one Chief Inspector, two Drainage, three Smoke, one Canal Boats, two Lodging-house, three Adulteration of Food, ten Factory and Workshops Inspectors (including two Female Inspectors), and four Drainage Excavators. There is also a Chief Clerk and a staff of 27 Clerks for administrative, clerical, and other work.

In the Drainage Department (which is under the Housing Manager) there are also three Clerks and three Clerks of Works for supervising and measuring up-work done by the contractors employed by the department in carrying out private drainage work.

In connection with the Public Conveniences there is a Foreman with an Assistant, a Female Supervisor and staff of 42 male and 22 female Attendants and Cleaners. At the Municipal Hostels, there is a Manager and Assistant with a staff of 37 Porters, Laundresses, etc., at Walton House (Males), and a Manageress and staff of 16 Portresses, etc., at Ashton House (Females). This work is under the supervision of the Chief Clerk.

The number of complaints of nuisances of various kinds made during the two years was 19,679:—

4,976	through the Medical Officer of Health's Department.
12,954	by the public.
32	through the Police.

HOUSES LET IN LODGINGS.

Under the powers given by Section 90 of the Public Health Act the bye-laws made thereunder have been enforced.

The number of houses on the register is 2,255. To these, 40,166 day visits and 467 night visits have been paid. 356 infringements of the regulations have been reported and dealt with.

WORKSHOPS, BAKEHOUSES, SHOPS ACTS, AND ORDERS MADE THEREUNDER.

Workshop Acts

During the year the Factory and Workshop Act of 1901 has received the careful attention of the Male and Female Inspectors specially appointed for the duties, the Female Inspectors devoting a large portion of their time to visiting the 1,532 houses of outworkers in the City.

Means of Escape in case of Fire

Provision for means of escape in case of fire in factories and workshops has also received attention, and all known cases of danger have been dealt with.

Periodical changes will, of course, take place from time to time in various ways which will bring buildings within the meaning of the Act, and necessitate the constant supervision of the Inspectors and action on the part of the Authorities.

Bakehouses

The number of bakehouses in the City is 673; of these, 47 are situate in basement premises, and special attention has been given to them.

Shops Acts

The Shops Act, which came into force on the 1st May, 1912, has received attention, registers of all shops having been prepared. Orders of Exemption from compulsory closing have been made in 33 trades. In 6 trades Orders have been made fixing the day for the weekly half-holiday, and in 3 trades Orders have been made fixing the closing hour for the several days of the week.

Outworkers

Many visits have been paid to houses in various parts of the City in which outwork is carried on, as will be seen on reference to the following tabulated statement, but constant visitation is necessary to maintain the standard of cleanliness which is to be desired, especially in houses in which shirt-making, handkerchief-hemming, brace-making, and umbrella-covering, etc., is done.

The people, as a rule, appear willing to carry out any suggestion made by the Inspectors to keep their houses clean; but at the same time it is almost impossible for small houses, sometimes containing large families, to be kept in such a satisfactory condition as workshops.

Table showing the work done by the Inspectors under the Factory and Workshop and Shops Acts during 1923.

Number of District	INSPECTOR	SHOPS			FACTORIES AND WORKSHOPS.							BAKEHOUSES					OUT-WORKERS		Total number of Inspections
			Number of infringements reported to the Committee																
		Number visited	No. of cases in which magisterial proceedings have been taken	No. cautioned by Committee	Number visit	Number of premises in which Sanitary defects were found	Not provided with proper means of escape in case of fire	Means of escape in case of fire not being maintained in accordance with the requirements of the Act.	No. of cases reported to the Factory Inspector	No. of infringements reported to the Committee	No. of cases in which magisterial proceedings have been taken	Number visited	Number of premises in which Sanitary defects were found	Number of reports referred to Factory Inspector	No. of infringements reported to the Committee	No. of cases in which magisterial proceedings have been taken	Visits to houses where out-workers are employed	Houses found dirty	
1	William Moss	1481	4	2	2633	150	5	16	132	1	1	268	17	4	...	...	...	...	4382
2	Richard Tolson	1213	5	4	2689	143	8	27	21	...	...	451	43	1	2	1	8	...	4361
3	*Alfred Campbell and A. E. Beaumont	539	...	3	582	36	2	19	15	2	2	148	11	2	...	...	...	...	1269
4	Thomas Nicholson	2009	2	2	2875	121	1	36	95	...	...	453	57	1	...	...	25	...	5362
5	Thomas A. Linfoot	2741	...	2	2062	61	...	1	61	...	...	849	35	2	...	...	...	...	5652
6	Henry Pollitt	2336	...	5	2552	38	1	3	43	...	...	762	53	7	...	...	..	...	5650
7	Ernest Dooley	1591	1	4	1966	113	...	4	48	...	...	840	102	3	1	1	...	...	4397
8	George Vernon	1147	2	3	2834	198	19	65	178	...	...	179	25	2	...	...	...	...	4160
...	Mrs. Rosa G. Clift	1089	...	...	379	8	...	...	...	...	...	...	...	...	...	...	5493	3	6961
...	Miss Margaret F. Gunn	1110	...	...	1604	23	...	...	4	...	...	1	...	...	...	...	4350	12	7065
	Totals	15256	14	25	20176	891	36	171	597	3	3	3951	343	22	3	2	9876	15	49259

Totals on Registers—Shops, 24,680; Workshops, 3,476; Factories, 3,679; Bakehouses, 642; Outworkers, 1,532.

* A. Campbell absent sick from April 4th; died October 27th, 1922. A. E. Beaumont commenced January 8th, 1923.

Table showing the work done by the Inspectors under the Factory and Workshop and Shops Acts during 1924.

Number of District	INSPECTOR	SHOPS			FACTORIES AND WORKSHOPS							BAKEHOUSES					OUT-WORKERS		Total Number of Inspections
			Number of infringements reported to the Committee																
		Number visited	Number of cases in which Magisterial proceedings have been taken	Number cautioned by Committee	Number visited	Number of premises in which Sanitary defects were found	Not provided with proper means of escape in case of fire	Means of escape in case of fire not being maintained in accordance with the requirements of the Act	Number of cases reported to the Factory Inspector	Number of Infringements reported to the Committee	Number of cases in which Magisterial proceedings have been taken	Number visited	Number of premises in which Sanitary defects were found	Number of reports referred to Factory Inspector	Number of Infringements reported to the Committee	Number of cases in which Magisterial proceedings have been taken	Number of visits to houses where outworkers are employed	Number of houses found dirty	
1	William Moss	1770	8	11	2396	126	5	11	84	...	...	265	27	5	...	...	...	...	4431
2	Richard Tolson	1348	...	3	3004	163	8	34	36	3	1	287	34	...	1	1	...	...	4639
3	Albert E. Beaumont	1930	...	7	2113	76	3	25	49	...	...	424	26	3	...	...	...	...	4467
4	Thomas Nicholson	2181	...	5	2517	90	1	32	79	...	...	414	51	2	...	...	...	...	5112
5	Thomas A. Linfoot	2589	...	7	1949	41	1	...	46	...	...	883	46	5	...	...	...	...	5421
6	Henry Pollitt	1953	2	13	2910	81	...	1	63	...	...	946	52	5	...	...	...	...	5809
7	Ernest Dooley	1870	...	8	1864	122	1	2	46	...	...	963	78	11	...	...	...	...	4697
8	George Vernon	1536	...	4	2679	233	16	37	158	...	...	179	23	2	...	...	...	...	4394
...	Mrs. Rosa G. Clift	798	...	...	426	18	...	...	2	...	...	...	...	...	...	...	5686	5	6910
...	Miss Margaret F. Gunn	1106	...	...	1355	11	...	...	...	...	...	5	...	...	...	...	3760	8	6226
	TOTALS	17081	10	58	21213	961	35	142	563	3	1	4366	337	33	1	1	9446	13	52106

Totals on Registers—Shops, 25,073; Workshops, 3,331; Factories, 3,806; Bakehouses, 673; Outworkers, 1,532.

TABLE SHOWING THE NUMBER AND CLASSIFICATION OF PERSONS EMPLOYED AS OUTWORKERS BY FIRMS WITHIN THE CITY, AND THE NUMBER OF SUCH FIRMS.

TRADES	No. of Employers	No of Outworkers or Contractors employed
Makers of Wearing Apparel	353	1393
Button Carding	1	3
Cabinet Makers and Upholsterers	4	20
Artificial Flower Makers	1	1
Handkerchief Hemmers	10	20
Lace, Lace Curtains, and Nets	3	25
Opticians	1	1
Quilt, Cushions, etc., Makers	4	29
Umbrella Trimmers	16	106
Window Blinds	2	12
Wash Leathers and Mops	1	16
Football Makers	1	3
Watch and Clock Repairers	1	1
Shopping Bag Makers	1	25
Sponge Cloths, Dusters, etc.	2	8
Totals	401	1663*

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*1,441 of these are in the City, the remainder are in the districts of other Local Authorities, to whom lists showing the names and addresses have been sent.

TABLE SHOWING THE PROCEEDINGS TAKEN UNDER THE PROVISIONS OF THE ADULTERATION OF FOOD AND DRUGS AND THE MARGARINE ACTS DURING 1923–24.

ARTICLE	Number of Samples Obtained	Number Adulterated	Number not Adulterated	Number Summoned before Magistrates	Number Fined	Number Ordered to Pay Costs only	Number Dismissed or Withdrawn	Number Cautioned by Committee	Amount of Fines Imposed £ s. d	Amount of Costs Ordered to be Paid £ s. d.
Arrowroot and Corn Flour	35	..	35	..	..	..	..	..	....	....
Bacon	18	..	18	..	..	..	..	..	....	....
Baking Powder	48	..	48	..	..	..	..	..	....	....
Beer	80	..	80	..	..	..	..	..	....	....
Beef Dripping	14	..	14	..	..	..	..	..	....	....
Bread	61	..	61	..	..	..	..	..	....	....
Butter	161	..	161	..	..	..	..	..	....	....
Camphorated Oil	42	..	42	..	..	..	..	..	....	....
Castor Oil	34	..	34	..	..	..	..	..	....	....
Cheese	45	..	45	..	..	..	..	..	....	....
Cocoa	72	..	72	..	..	..	..	..	....	....
Cod Liver Oil	32	..	32	..	..	..	..	..	....	....
Coffee	129	..	129	..	..	..	..	..	....	....
Confectionery & Mincemeat	222	..	222	..	..	..	..	..	....	....
Cream and Preserved Cream	94	*15	79	..	..	..	..	14	....	13 13 0
Drugs	790	*2	788	..	..	..	..	..	....	....
Flour	154	..	154	..	..	..	..	..	....	....
Fish (tinned and potted)	65	..	65	..	..	..	..	..	....	....
Jams	89	..	89	..	..	..	..	..	....	....
Ketchup and Sauces	33	..	33	..	..	..	..	..	....	....
Lard	80	..	80	..	..	..	..	..	....	....
Margarine	45	..	45	..	..	..	..	..	....	....
Meat (tinned and prepared)	116	..	116	..	..	..	..	..	....	....
Meat Extract	24	..	24	..	..	..	..	..	....	....
Milk	2260	172	2088	97	39	43	15	32	147 0 0	166 18 0
Milk (condensed and evaporated)	80	..	80	..	..	..	..	..	....	....
Milk (skimmed)	9	..	9	..	..	..	..	..	....	....
Mineral Waters, Cordials, &c	129	13	116	5	..	5	..	8	....	8 6 6
Mustard	16	..	16	..	..	..	..	..	....	....
Oatmeal	56	..	56	..	..	..	..	..	....	....
Olive Oil	39	..	39	..	..	..	..	..	....	....
Pearl Barley	12	..	12	..	..	..	..	..	....	....
Pepper	38	..	38	..	..	..	..	..	....	....
Pickles	8	..	8	..	..	..	..	..	....	....
Porter	1	..	1	..	..	..	..	..	....	....
Rice, Tapioca, &c.	74	..	74	..	..	..	..	..	....	....
Shrimps	8	..	8	..	..	..	..	..	....	....
Spices	31	..	31	..	..	..	..	..	....	....
Spirits	287	*4	283	..	..	..	..	1	....	1 1 0
Sugar	33	..	33	..	..	..	..	..	....	....
Tea	100	..	100	..	..	..	..	..	....	....
Treacle and Golden Syrup	51	..	51	..	..	..	..	..	....	....
Wines	54	..	54	..	..	..	..	..	....	....
Cider	15	..	15	..	..	..	..	..	....	....
Honey	24	..	24	..	..	..	..	..	....	....
Infants' Food	16	..	16	..	..	..	..	..	....	....
Jellies	38	..	38	..	..	..	..	..	....	....
Fruit (tinned)	31	..	31	..	..	..	..	..	....	....
Tripe	19	..	19	..	..	..	..	..	....	....
Vegetables (tinned)	3	..	3	..	..	..	..	..	....	....
Vinegar	22	..	22	..	..	..	..	..	....	....
Totals	5937	*206	5731	102	39	48	15	55	147 0 0	189 18 6

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* In 49 of these cases no magisterial proceedings were taken; 25 samples of milk, 2 samples of drugs, and 1 sample of cream having been taken informally, and no action was taken in the cases of 18 samples of milk and 3 samples of spirit slightly adulterated. In addition to the above 680 samples of milk have been procured from farmers' cans by the Sampling Officers for bacteriological examination under the Milk Clauses of the Manchester General Powers Acts.

SMOKE NUISANCES.

For the abatement of smoke nuisances the three Inspectors appointed specially for this work have taken 742 timed observations of half-an-hour each, with the result that 156 notices for the abatement of nuisances have been served. Proceedings before the Magistrates were ordered in 144 cases out of 230 offences reported. The number of offenders cautioned or excused was 86.

The 144 were summoned before the Justices, and in 113 instances fines were imposed amounting to £248 15s. 0d., while 4 were ordered to pay costs only (£1 1s. 0d.).

Twenty-one orders of abatement were granted and served, and the costs paid in connection therewith amounted to £8 8s. 0d., and 6 cases were dismissed or withdrawn.

Much attention during the past year has been given to the nuisance caused by the emission of black smoke, not only from the furnaces connected with boilers in mills, warehouses, and other works, but also from chemical and other industries, and the efforts made have already resulted in a considerable reduction of the nuisance.

Chimneys of firms in adjoining districts have also been observed in regard to smoke nuisances, and communications sent to the Authorities concerned.

CANAL BOATS ACTS.

The number of canal boats on the register is 454.

The number of inspections made was 3,866.

Caution notices were sent to the owners or masters of 67 boats, and 61 owners or masters were verbally cautioned by the Inspector, all of which have been attended to.

OFFENSIVE TRADES.

The number of offensive trades on the register is 890. These have been placed under close supervision, and periodical visits paid.

UNHEALTHY DWELLINGS.

During the two years, 77 houses were certified as unfit for human habitation, and ordered to be closed by the Public Health Committee.

MILK AND CREAM REGULATIONS, 1912 AND 1917.

The following is a summary of the action taken under these regulations in 1923–1924 :—

1. *Milk and Cream not sold as Preserved Cream.*

	(*a*) Number of samples examined for the presence of a preservative	(*b*) Number in which a preservative was reported to be present
Milk	2,191	1
Cream	31	18

Nature of preservative in each case in column (*b*) and action taken under the Regulations in regard to it. (See table below.)

Article	No. of Sample	Formal or Informal	Result of Analysis	Action taken
Cream.. ..	1033C	Formal	Contained 0·26 per cent, of Boric Acid and 50·13 per cent. of fat	Cautioned by Committee and costs paid
Do. ..	1257C	Informal	Contained 0·44 per cent. of Boric Acid and 42·76 per cent. of fat	None. (Informal sample)
Do. ..	1653C	Formal	Contained 0·22 per cent. of Boric Acid	Cautioned by Committee and costs paid
Do. ..	1667C	do.	Contained 0·28 per cent. of Boric Acid	do.
Do. ..	1670C	do.	Contained 0·33 per cent. of Boric Acid	do.
Do. ..	1678C	do.	Contained 0·37 per cent. of Boric Acid	do.
Do. ..	1683C	do.	Contained 0·25 per cent. of Boric Acid	do.
Do. ..	1700C	do.	Contained 0·31 per cent. of Boric Acid	do.
Do. ..	1701C	do.	Contained 0·29 per cent. of Boric Acid	do.
Do. ..	1267B	do.	Contained 0·17 per cent. of Boric Acid	do.
Do. ..	1268B	do.	Contained 0·37 per cent. of Boric Acid	do.
Do. ..	691	do.	Contained 0·21 per cent. of Boric Acid	do.
Do. ..	1789C	do.	Contained 0·25 per cent. of Boric Acid	do.
Milk	122	Informal	Contained added Sodium Carbonate	None. (Informal sample)
Cream.. ..	1164C	Formal	Contained 0·28 per cent. of Boric Acid	Cautioned by Committee and costs paid
Do. ..	1416C	do.	Contained 0·24 per cent. of Boric Acid	do.
Do. ..	1481C	do.	Contained 0·32 per cent. of Boric Acid	do.
Do. ..	743	Informal	Contained 0·25 per cent. of Boric Acid	None. (Informal sample)
Do. ..	755	Formal	Contained 0·25 per cent. of Boric Acid	Cautioned by Committee and costs paid

2. *Cream sold as Preserved Cream.*

(A) Instances in which samples have been submitted for analysis to ascertain if the statements on the labels as to preservatives were correct :—

(1) Correct statements made	59
(2) Statements incorrect	3
Total	62

(B) Determination made of milk fat in cream sold as preserved cream :—

(1) Above 35 per cent.	62
(2) Below 35 per cent.	..
Total	62

(C) Instances where (apart from analysis) the requirements as to labelling or declaration of preserved cream in Article V. (1) and the proviso in Article V. (2) of the Regulations have not been observed.

(D) Particulars of each case in which the Regulations have not been complied with and action taken.

Answers to Question 2 (C and D).

Sample 1152C was purchased as Preserved Cream without being labelled, and contained 0·35 per cent of boric acid and 53·50 per cent. of fat. The person concerned was cautioned by Committee and ordered to pay costs.

Sample 1270C, upon analysis, was found to contain 0·42 per cent. of boric acid and 44·04 per cent. of fat. The excess quantity of boric acid being so slight, no action was taken.

Sample 1675C was purchased as Preserved Cream without being labelled, and contained 0·27 per cent. of boric acid and 47·89 per cent. of fat. The person concerned was cautioned by Committee and ordered to pay costs.

3. *Thickening Substances.*—Any evidence of their addition to cream or to preserved cream. Action taken where found.—None.

4. *Other Observations*, if any.

NUMBER OF NOTICES ISSUED FOR ABATEMENT OF NUISANCES UNDER THE VARIOUS LOCAL ACTS AND BYE-LAWS, DURING 1923 AND 1924.

Act of Parliament	Work required to be done	No. of Notices Issued
Manchester Police Act, 1844 (Section 86)	Cleanse and limewash houses	112
,, ,, ,,	,, ,, (privies)	19
Manchester Corporation Waterworks and Improvement Act, 1867 (Section 42) and 1869 (Section 34)	Repairs to privies etc. ..	588
Manchester Corporation Waterworks and Improvement Act, 1869 (Section 29)	Renew defective downspouts and gutters	*1,445
Manchester Corporation Waterworks and Improvement Act, 1869 (Section 31)	Discontinue keeping swine .	2
Manchester New Streets Act, 1853 (Section 41) Manchester Corporation Act, 1891 (Section 38)	Repair or flag surfaces of yards and passages	*2,014
Manchester New Streets Act, 1853 (Section 45)	Discontinue occupying cellars as dwelling-rooms	—
Manchester Improvement Act, 1845 (Section 46)	Open, cleanse, and repair drains	1,687
Manchester Bye-laws relating to houses let in lodgings	Alterations and general repairs	187
Not issued under any Act of Parliament ..	Preliminary notice for general repairs	*5,635

NOTE.—The majority of the notices issued have been complied with, including the preliminary notices (marked with an asterisk), and of the latter notices not complied with, the worst cases have been referred to the Housing Committee to be dealt with under the Housing and Town Planning Act, 1919.

Table showing the Number of Lodging-houses in the City, the Number of Visits to such Houses, and the Number of Cases Reported for Offences against the Bye-Laws, during the Years 1923 and 1924.

Number of Lodging-Houses on the Register	Number of Visits		Total Number of Visits	Number of Offences Reported to Committee	Number ordered to be Summoned	Number Cautioned, Excused, or Reported to other Committees	Minor Offences Cautioned by Chief Inspector
	Day	Night					
2,331	31,495	343	31,838	271	192	79	39

Table showing the Number of Cases in which Magisterial Proceedings were taken and the Result of same.

Description of Offence	Number of Summonses taken Out	Number of Persons Fined with Costs	Number of Persons Ordered to Pay Costs only	Number Adjourned	Number Excused, Dismissed, or Withdrawn	Amount of Fines Imposed £ s. d.	Amount of Costs Ordered to be Paid £ s. d.
Lodging-houses in a dirty state	124	46	31	—	47	26 10 0	7 14 0
Lodging-houses overcrowded	29	16	3	—	10	7 8 0	0 15 0
Mixing of sexes	14	6	3	—	5	1 3 0	0 15 0
Using kitchen and unregistered room as sleeping rooms	4	2	1	—	1	1 10 0	0 5 0
Keeping animals so as to render premises unwholesome	4	2	1	—	1	1 0 0	0 5 0
Neglecting to furnish particulars of lodging-houses	5	—	3	—	2	—	0 15 0
Neglecting to comply with notice to provide water supply, etc.	9	—	6	—	3	—	1 10 0
Obstructing Inspector whilst in the execution of his duty	1	1	—	—	—	0 10 0	—
Sleeping room not effectually screened	2	—	—	—	2	—	—
Totals	192	73	48	—	71	38 1 0	11 19 0

BAKEHOUSES AND OTHER PREMISES IN WHICH FOOD IS PREPARED.

The total number of visits made by Inspectors to bakehouses during the year was 4,366, and their routine work is referred to on page 195.

Visits were made in connection with 67 applications for the use of premises as bakehouses, with the result that 23 were considered unsuitable and 44 were approved on certain conditions being fulfilled.

The following table relates to bakehouses, restaurant kitchens, and foodshops in which Mr. Irvine was requested by the Medical Officer of Health to prepare specifications of the work required in order to make the premises fit for the purpose :—

Specification for bakehouses prepared prior to 1924 in which work was completed during 1924 or still in progress on December 31st, 1924 :—

Number of specifications prepared	3
,, in progress	—
,, discontinued as a bakehouse	—
,, completed	3

Specifications for bakehouses prepared in 1924 :—

,, of specifications prepared	1
,, in progress	—
,, discontinued	—
,, completed	1

Specifications for restaurants prepared prior to 1924, in which work was completed during 1924, or is still in progress on December 31st, 1924 :—

Number of specifications prepared	10
,, in progress	4
,, discontinued	2
,, completed	1
,, nothing done	3

Specifications for restaurants prepared in 1924 :—

Number of specifications prepared	2
,, in progress	1
,, discontinued	—
,, nothing done	1

Specifications for pork butchers and sausage makers prepared prior to 1924 in which work was completed during 1924 or is still in progress :—

Number of specifications prepared	8
,, in progress	1
,, complete	3
,, discontinued	3
,, nothing done	1

Specifications for pork butchers and sausage makers prepared in 1924 :—

Number of specifications prepared	3
,, in progress	1
,, nothing done	—
,, discontinued	1
,, complete	1

Specifications for other food preparing premises prepared prior to 1924 in which work was completed during 1924 or is still in hand :—

Number of specifications prepared	5
,, in progress	—
,, nothing done	2
,, discontinued	1
,, completed	2

Specifications for other food preparing premises prepared in 1924 :—

Number of specifications prepared	5
,, in progress	1
,, nothing done	2
,, discontinued	1
,, completed	1

TABLE A, 1923.—WORK OF SANITARY DEPARTMENT FOR THE YEAR.

		TOWNSHIPS																						
		Ancoats	Central	St. George's	Cheetham	Crumpsall	Blackley	Harpurhey	Moston	Newton	Bradford	Beswick	Clayton	Ardwick	Openshaw	Gorton (West)	Rusholme and Kirkmanshulme	Chorlton-upon-Medlock	Hulme	Moss Side	Withington	Levenshulme	Gorton	TOTALS
Complaints to Sanitary Superintendent ...		831	687	454	567	166	89	205	167	537	680	83	261	566	384	379	567	761	982	223	147	184	478	9,398
Inspections of	Dwelling-houses	5083	1999	3557	1806	871	317	1056	1357	4042	832	920	1949	1488	1207	1850	2511	2792	5355	2263	758	1291	3871	47,175
	Newly-infected Dwelling-houses	355	134	359	291	132	111	151	213	368	172	88	54	352	290	234	264	309	655	199	297	190	420	5,638
	Cellars	...	108	84	...	...	...	...	...	2	...	...	...	5	...	...	2	...	1	...	...	...	7	209
	Schools	8	3	5	1	1	3	1	...	2	...	3	...	5	...	2	9	1	10	2	3	3	8	70
	Factories and Workshops	7	305	191	4	...	4	1	5	155	3	...	...	20	...	2	1	10	15	1	2	...	...	726
	Lodging-houses	2680	3650	5067	1622	5	133	141	49	164	327	259	55	610	54	4	106	3108	1080	86	2	40	8	19,250
	Offensive Trades	120	46	151	22	7	2	2	12	47	16	26	213	72	1	2	13	69	54	3	11	14	15	918
	Dairies and Milkshops	1523	1331	1184	1113	195	245	585	577	1108	826	313	476	1662	762	514	904	2351	2067	424	831	280	1490	20,761
	Ice Cream Manufactories	508	8	88	15	...	5	7	3	5	9	1	1	31	20	31	9	23	15	9	2	9	10	809
	Bakehouses	147	167	188	318	27	137	125	120	142	94	80	67	198	243	135	245	386	333	280	399	178	291	4,300
	Canal Boats	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1,926
	Slaughter-houses	...	1	...	3	...	2	1	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	8
	Tips for Refuse	...	15	2	56	35	6	7	22	97	...	...	10	21	26	...	10	...	1	...	11	6	25	350
	Miscellaneous Inspections	1103	1587	1338	339	80	16	30	178	485	80	454	68	2194	246	124	662	1071	773	115	1703	160	1611	14,417
	Stables, &c.	997	1143	479	443	287	53	110	51	427	155	75	333	602	97	229	338	855	547	170	275	267	191	8,124
	Factories and Workshops by Shop Hours, &c., Inspectors	1173	5380	2210	3381	168	208	315	183	550	235	192	128	959	421	536	648	1913	927	494	656	244	370	21,291
	Shops by Shop Hours, &c., Inspectors	828	2413	1400	1673	151	413	544	444	745	367	400	189	640	624	530	708	1012	824	581	714	326	616	16,242
Infected Rooms Disinfected		2904	502	1044	556	306	117	164	641	648	423	769	180	887	534	601	589	845	1584	431	962	281	662	15,630
Infected Dwellings Re-inspected		1926	1088	1428	1862	431	358	585	1888	1023	634	333	184	1117	1140	582	686	1504	1834	368	1447	499	1317	22.234
Drains Tested by Water		28	154	46	70	67	42	6	42	59	16	5	40	71	13	27	510	161	59	57	686	138	90	2,387
Smoke Abatement	Observations made........	36	56	3	14	7	8	4	2	39	15	6	43	15	22	47	8	14	33	1	2	2	4	381
	Proceedings before Magistrates	7	13	1	1	1	3	3	1	1	6	1	10	3	3	3	...	2	4	1	...	...	1	65
Food Adulteration	Samples Collected for Analysis	100	677	72	138	29	27	29	34	29	25	10	26	78	91	114	172	359	260	236	223	132	105	*2,967
	Proceedings before Magistrates	...	10	...	5	...	1	...	1	...	...	...	...	...	...	...	2	1	...	...	3	4	1	28
Ashpits reported to Cleansing Department for emptying		...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	1	2	...	...	...	...	4
Receptacles reported to Cleansing Department for emptying		...	1	1	2	...	...	...	...	...	...	...	...	...	...	...	...	...	1	4	...	1	...	10
Notices issued for Abatement of Nuisances.		676	752	796	715	67	82	190	284	425	565	194	152	755	228	205	475	986	1342	337	471	320	501	§10,556
Letters written for Abatement of Nuisances		24	49	28	38	1	...	1	1	8	7	2	5	14	1	2	8	19	23	2	...	1	2	‡236
Reports made to Medical Officer of Health		352	168	139	155	27	2	18	26	124	169	3	73	240	100	108	110	140	189	23	4	9	103	2,282
Legal proceedings taken		8	19	4	51	...	...	...	3	...	...	...	...	37	3	...	3	48	10	3	2	5	...	196
Total Nuisances abated		604	658	737	855	35	71	122	310	385	540	210	144	784	180	333	411	917	1228	277	513	267	539	10,123

* 1 Sample procured outside the City. ‡ In addition to these there were 1,679 circular letters sent to owners *re* defective water-closets and ashbins, and 3,815 orders on the Cleansing Department for new ashbins were sent to owners or contractors. § Includes 56

		Ancoats	Central	St. George's	Cheetham	Crumpsall	Blackley	Harpurhey	Moston	Newton	Bradford	Beswick	Clayton	Ardwick	Openshaw	Gorton (West)	Rusholme and Kirkmanshulme	Chorlton-upon-Medlock	Hulme	Moss Side	Withington	Levenshulme	Gorton	TOTALS
Complaints to Sanitary Superintendent		778	692	378	502	179	117	222	153	408	553	123	189	525	453	353	696	556	595	248	210	138	409	8,477
Inspections of	Dwelling-houses	3409	1993	2742	1276	751	425	680	1376	3611	786	849	1623	1105	1146	1769	2011	1948	3407	2456	746	1232	2441	37,782
	Newly-infected Dwelling-houses	311	177	460	268	78	151	174	210	394	265	89	61	343	270	260	295	300	602	210	161	201	449	5.729
	Cellars	6	48	187	...	...	...	...	...	...	1	...	...	3	...	...	...	...	...	...	1	...	...	246
	Schools	8	3	13	2	...	1	3	...	...	1	10	1	6	2	...	12	1	...	1	6	1	3	74
	Factories and Workshops	50	258	75	...	..	...	1	...	275	4	5	...	14	1	4	4	18	...	...	3	...	...	712
	Lodging-houses	1757	2701	4271	1078	25	89	68	28	150	154	89	28	241	4	29	55	1262	425	86	14	2	32	12,588
	Offensive Trades	126	227	116	30	10	40	31	29	97	18	24	370	144	54	90	58	146	101	51	50	26	138	1976
	Dairies and Milkshops	1066	1018	684	326	158	172	286	355	708	368	240	234	1118	355	188	480	916	370	115	609	132	743	10,641
	Ice Cream Manufactories	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Bakehouses	161	234	254	319	21	89	115	129	157	100	63	63	201	255	152	278	443	338	294	385	198	276	4,525
	Canal Boats	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1 900
	Slaughter-houses	...	...	...	1	...	..	...	...	...	...	...	...	...	...	...	2	...	...	...	...	1	...	4
	Tips for Refuse	...	17	17	94	42	36	36	35	81	...	...	49	36	29	...	19	5	...	6	24	10	37	573
	Miscellaneous Inspections	959	1845	743	305	122	100	132	282	317	81	929	24	1955	367	88	689	8046	398	168	1526	142	876	13,095
	Stables, &c.	787	873	260	22	253	64	100	45	229	118	62	190	431	17	79	129	555	120	94	249	168	188	5,033
	Factories and Workshops by Shop Hours, &c., Inspectors	1221	5028	2041	2842	95	225	394	275	665	227	191	140	861	456	437	708	1882	874	595	619	267	285	20,328
	Shops by Shop Hours, &c., Inspectors	890	2191	1121	1330	130	361	572	415	831	351	380	138	670	724	468	766	1020	1098	478	607	378	704	15,623
Infected Rooms Disinfected		2093	402	1103	540	320	121	270	475	542	509	509	183	927	563	625	667	686	1588	301	650	234	950	14,258
Infected Dwellings Re-inspected		1857	943	1445	1707	333	326	586	1397	1030	585	294	241	1219	1027	1042	856	898	1801	536	1109	521	1640	21,393
Drains Tested by Water		79	163	41	69	207	76	7	53	29	26	10	22	91	30	14	848	130	77	39	759	115	93	2,978
Smoke Abatement	Observations made	23	38	10	25	...	15	5	1	43	30	1	36	26	15	3	22	25	40	3	6	2	8	377
	Proceedings before Magistrates	8	7	1	3	...	2	3	...	11	3	...	16	...	2	...	2	...	5	1	...	...	...	64
Food Adulteration	Samples Collected for Analysis	83	690	109	174	33	25	26	38	114	31	7	13	235	98	104	156	190	256	210	215	148	97	3,052
	Proceedings before Magistrates	...	20	1	...	...	1	...	...	...	...	...	...	...	...	...	...	9	4	...	3	1	...	39
Ashpits reported to Cleansing Department for emptying		...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Receptacles reported to Cleansing Department for emptying		...	3	2	3	4	...	...	...	3	...	...	...	...	...	...	2	...	...	1	...	...	...	18
Notices issued for Abatement of Nuisances		555	693	827	654	86	77	133	250	368	482	232	98	667	250	384	493	812	959	330	262	303	510	§9.425
Letters written for Abatement of Nuisances		17	42	39	24	6	1	...	1	11	4	1	4	10	5	2	1	14	10	5	1	3	5	‡206
Reports made to Medical Officer of Health		10	135	6	...	22	...	...	27	115	...	...	3	123	19	...	83	26	...	7	173	15	24	78[illegible]
Legal proceedings taken		8	18	6	13	1	2	5	...	14	3	2	21	6	3	1	2	7	5	2	3	...	10	132
Total Nuisances abated		519	590	710	633	35	71	151	232	328	380	234	101	651	187	340	419	698	858	290	349	235	547	8.558

‡ In addition to these there were 1,113 circular letters sent to owners *re* defective water-closets and ashbins, and 3,145 orders on the Cleansing Department for new ashbins were sent to owners or contractors. § Includes 29 notices issued for repairs to Canal Boats. It will be noted that the number of nuisances abated exceeds the number of notices issued during the year; this is owing to a considerable number of outstanding notices having been complied with in this period.

TABLE B.

Annual Report of the Medical Officer of Health for the year 1923, for the County Borough of Manchester, on the administration of the Factory and Workshop Act, 1901, in connection with

FACTORIES, WORKSHOPS, WORKPLACES, AND HOMEWORK.

1.—INSPECTION OF FACTORIES, WORKSHOPS, AND WORKPLACES.

Including Inspections made by Sanitary Inspectors or Inspectors of Nuisances.

Premises	Number of		
	Inspections	Written Notices	Prosecutions
Factories (including Factory Laundries) ..	22,017	222	4
Workshops (including Workshop Laundries) ..			
Workplaces (other than Outworkers' premises included in Part 3 of this Report)			
Total	22,017	222	4

2.—DEFECTS FOUND IN FACTORIES, WORKSHOPS, AND WORKPLACES.

Particulars	Number of Defects			No. of Prosecutions
	Found	Remedied	Referred to H.M. Inspector	
Nuisances under the Public Health Acts :—*				
Want of cleanliness	609	609	..	..
Want of ventilation..	16	15	..	..
Overcrowding	4	4	..	..
Want of drainage of floors ..	..	..	..	..
Other nuisances..	119	117	..	..
Sanitary accommodation—				
Insufficient	32	9	..	..
Unsuitable or defective ..	204	163	..	..
Not separate for sexes ..	6	3	..	..
Offences under the Factory and Workshop Act :—				
Illegal occupation of underground bakehouse (S. 101)..	..	..	..	..
Breach of special sanitary requirements for bakehouses (SS. 97 to 100)	361	361	..	..
Other offences (excluding offences relating to outwork which are included in Part 3 of this Report)	3	3	1	..
Means of escape in case of fire (insufficient)	43	21	..	4
Means of escape in case of fire (defective)	161	160	..	..
Total	1,558	1,465	1	4

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* Including those specified in sections 2, 3, 7, and 8 of the Factory and Workshop Act as remediable under the Public Health Acts.

TABLE B.

Annual Report of the Medical Officer of Health for the year 1924 for the County Borough of Manchester, on the administration of the Factory and Workshop Act, 1901, in connection with

FACTORIES, WORKSHOPS, WORKPLACES, AND HOMEWORK.

1.—INSPECTION OF FACTORIES, WORKSHOPS, AND WORKPLACES.

Including Inspections made by Sanitary Inspectors or Inspectors of Nuisances.

Premises	Number of		
	Inspections	Written Notices	Prosecutions
Factories (including Factory Laundries) .. Workshops (including Workshop Laundries) .. Workplaces (other than Outworkers' premises included in Part 3 of this Report)	25,925	255	3
Total	25,925	255	3

TABLE B—*continued*

2.—DEFECTS FOUND IN FACTORIES, WORKSHOPS, AND WORKPLACES.

Particulars	Number of Defects			No. of Prosecutions
	Found	Remedied	Referred to H.M. Inspector	
*Nuisances under the Public Health Acts :—**				
Want of cleanliness	455	442	..	..
Want of ventilation..	15	14	..	..
Overcrowding	1	1	..	..
Want of drainage of floors ..	..	..	..	..
Other nuisances..	84	79	..	2
Sanitary accommodation—				
Insufficient	22	9	..	..
Unsuitable or defective ..	117	150	..	..
Not separate for sexes ..	11	1	..	..
Offences under the Factory and Workshop Act :—				
Illegal occupation of underground bakehouse (S. 101)..	..	..	..	..
Other offences (excluding offences relating to outwork and offences under the sections mentioned in the schedule to the Ministry of Health (Factories and Workshops Transfer of Powers Order, 1921)	546	515	..	1
Total	1,301	1,211	..	3

* Including those specified in sections 2, 3, 7, and 8 of the Factory and Workshop Act as remediable under the Public Health Acts.

NOTE.—The Factory and Workshop Act, 1901 (S. 132), requires the Medical Officer of Health in his Annual Report to the District Council to report specifically on the administration of that Act in workshops and workplaces, and to send a copy of his Annual Report, or so much of it as deals with this subject, to the Secretary of State (Home Office). If the Annual Report is presented otherwise than in print, it is unnecessary to include in the copy sent to the Home Office the portions which do not relate to factories, workshops, workplaces, or homework. The duties of Local Authorities and the Medical Officer of Health under the Act of 1901 are detailed in the Home Office Memorandum of December, 1904. A further Memorandum, on the Home Work Provisions of the Factory Act, was issued to all District Councils and Medical Officers of Health in October, 1906.

I append a brief Statement on the Memorandum of the Home Office upon the structural requirements of the Factory and Workshop Acts, as to

1. Means of escape from fire :—

Bye-laws have been in operation since 1908. These have been amended, and in their amended form were approved by the Local Government Board in 1913.

A large amount of work has been done under these bye-laws, and practically the whole of the factories and workshops have been dealt with.

2. Sanitary accommodation :

Although the work has not been carried out under the Sanitary Accommodation Order, 1903, the conditions stated in the Memorandum have been enforced, and all the factories and workshops have been dealt with, although changes are constantly occurring.

CLOSET ACCOMMODATION.

The following table shows the manner in which the conversion was effected from pails and middens in the City to water-closets. This conversion was accompanied by the necessary alterations in house drains, passage drains, paving of passages, and in the houses themselves. These alterations cannot be exhibited in tabular form, at all events so far as drainage and paving is concerned.

RETURN OF PAIL-CLOSETS AND MIDDEN-PRIVIES ALTERED TO WATER-CLOSETS.

	Number of Pail-Closets altered to Water-Closets	Number of Midden-Privies altered to Water-Closets	Number of Slop Water-Closets altered to Water-Closets
From April 1st, 1891, to March 31st, 1892	16	39	—
” ” 1892, ” 1893	98	100	—
” ” 1893, ” 1894	138	141	—
” ” 1894, ” 1895	179	89	—
” ” 1895, ” 1896	185	119	—
” ” 1896, ” 1897	197	284	—
” ” 1897, ” 1898	179	405	—
” ” 1898, ” 1899	136	960	—
” ” 1899, ” 1900	249	897	—
” ” 1900, ” 1901	180	1,327	—
” ” 1901, ” 1902	385	999	—
” ” 1902, ” 1903	976	1,282	—
” ” 1903, ” 1904	1,899	1,379	—
” ” 1904, ” 1905	2,222	1,691	—
” ” 1905, ” 1906	3,297	*2,600	—
” ” 1906, ” 1907	3,746	3,662	—
” ” 1907, ” 1908	1,296	918	—
” ” 1908, ” 1909	10,081	2,844	—
” ” 1909, ” 1910	11,296	1,378	45
” ” 1910, ” 1911	8,552	1,204	217
” ” 1911, ” 1912	6,970	*3,180	121
” ” 1912, ” 1913	4,214	533	153
” ” 1913, ” 1914	1,420	78	14
” ” 1914, ” 1915	428	61	3
” ” 1915, ” 1916	155	14	—
” ” 1916, ” 1917	29	6	—
” ” 1917, ” 1918	3	—	—
” ” 1918, ” 1919	76	13	—
” ” 1919, ” 1920	1	—	—
” ” 1920, ” 1921	2	—	—
” ” 1921, ” 1922	14	—	—
” ” 1922, ” 1923	10	—	—
” ” 1923, ” 1924	56	—	—
Total (85,441) ..	58,685	26,203	553

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* Extension of City Boundaries

HOUSING PARTICULARS FOR THE CITY OF MANCHESTER.

The figures are summarised below.

The number of houses certified to, and dealt with by, the Housing Sub-Committee from February, 1885, to December 31st, 1924.

	Number Certified and ordered to be Closed	Number of Houses added together or to other Houses	Number Demolished	Number Repaired and Reopened	Number Closed	Number not Closed	Number which stand Adjourned
Totals.. ..	27,453	3,385	6,980	13,594	1,244	2,149	101

The extent to which these operations have been reduced is seen from the corresponding figures relating to—

Totals	1923	44	—	—	—	—	44	—
	1924	15	—	—	—	—	3	12

The number of conversions from pail-closets and midden privies to water-closets is given herewith :—

From April 1st, 1903, to March 31st, 1923	75,272
From April 1st, 1922, to March 31st, 1923	10
From April 1st, 1903, to March 31st, 1924	75,328
From April 1st, 1923, to March 31st, 1924	56

The numbers still requiring to be replaced are—middens, 35 ; pail-closets, 1,300 (1923), and 1,234 (1924). The number of water-closets in Manchester is estimated (at December 31st, 1923) to be 226,975, of which 178,239 are in houses, and 48,736 are in warehouses, workshops, etc. The corresponding figures for 1924 are 229,754, 180,077, and 49,677.

TABLE I.

HOUSING AND TOWN PLANNING ACTS.

TABLE SHOWING THE CLASSIFICATION OF HOUSES INSPECTED IN EACH DISTRICT FROM JANUARY 1ST, 1923, TO DECEMBER 31ST, 1924.

DISTRICT	Number of Houses Inspected	Classification of Houses														Remarks
		Number of Rooms							Good	Minor Defects	Serious Defects		Unfit; cannot be remedied	Business Premises		
		1	2	3	4	5	6	over 6			Remediable without reconstruction	Irremediable without reconstruction		Partially	Totally	
Central	712	—	21	115	233	167	96	80	6	100	294	119	194	97	631	—
Cheetham	111	—	—	1	47	3	26	34	4	37	57	13	—	2	1	—
St. George's	367	—	—	7	211	119	7	23	6	208	43	110	—	20	6	—
Ancoats	829	—	26	167	495	133	6	2	11	274	161	225	158	87	62	—
Chorlton-on-Medlock .	1,245	—	32	92	349	272	232	268	2	632	414	105	92	143	107	—
Hulme	2,293	—	150	398	887	587	190	81	4	672	832	252	532	339	275	—
Harpurhey and Blackley	1,404	—	1	72	908	243	142	38	2	537	831	32	2	117	70	—
Moston	830	—	—	24	515	252	38	1	—	804	22	4	—	66	19	—
Newton Heath	82	—	—	6	63	7	1	5	29	53	—	—	—	16	10	—
Clayton	157	—	—	—	99	21	12	25	126	31	—	—	—	15	2	—
Openshaw	72	—	—	50	17	3	2	—	3	37	32	—	—	1	—	—
Gorton (West)	87	—	—	—	52	35	—	—	54	33	—	—	—	1	—	—
Rusholme	190	—	—	—	57	63	46	24	54	75	34	—	27	5	2	—
Levenshulme	108	—	—	—	35	29	37	7	73	27	7	1	—	8	10	—
Withington..	17	—	—	—	—	—	6	11	17	—	—	—	—	—	—	—
Didsbury	81	—	—	—	—	1	11	69	78	3	—	—	—	—	1	—
Ardwick	468	—	11	84	131	150	67	25	—	92	15	141	220	55	45	—
TOTALS	9,053	—	241	1,016	4,099	2,085	919	693	469	3,615	2,742	1,002	1,225	972	1,241	—

TABLE 2.

HOUSING AND TOWN PLANNING ACTS.

GENERAL CHARACTER OF THE HOUSES INSPECTED IN EACH DISTRICT FROM JANUARY 1ST, 1923, TO DECEMBER 31ST, 1924.

DISTRICT	Lack of Free Ventilation	Defective Light	Defective Drainage	Defective Paving, etc.	Want of Cleanliness	Dampness		Closets			Ashplaces		Defects		Overcrowding		General Summary of District
						From Ground	From Roof	W.C.'s	Pails	Privies	Bins	Boxes	Remediable	Irremediable	Over 2 persons per Room	Over 2½ persons per Bedroom	
Central	278	112	72	247	75	196	228	681	31	—	672	15	294	119	39	99	—
Cheetham	—	7	29	27	4	22	27	111	—	—	110	1	57	13	—	5	—
St. George's	—	2	45	42	16	27	59	367	—	—	367	—	43	110	6	35	—
Ancoats	147	76	75	84	66	129	111	814	15	—	820	9	161	225	51	160	—
Chorlton-on-Medlock	254	100	169	380	91	215	335	1,227	18	—	1,222	10	414	105	36	134	—
Hulme	505	286	375	402	136	721	394	2,273	20	—	2,271	20	832	252	144	421	—
Harpurhey and Blackley	11	6	108	453	38	123	47	1,404	—	—	1,345	46	831	32	41	192	—
Moston	5	3	56	61	8	80	340	830	—	—	827	3	22	4	5	44	—
Newton Heath	1	2	7	7	2	1	—	82	—	—	79	3	—	—	—	3	—
Clayton	—	—	2	18	—	3	7	157	—	—	157	—	—	—	3	18	—
Openshaw	—	—	11	33	—	1	1	72	—	—	72	—	32	—	6	13	—
Gorton (West)	—	—	3	10	—	—	5	87	—	—	87	—	—	—	—	5	—
Rusholme	29	3	38	32	3	18	14	190	—	—	190	—	34	—	1	7	—
Levenshulme	—	—	3	13	1	1	9	108	—	—	108	—	7	1	—	1	—
Withington	—	—	—	—	—	—	—	17	—	—	17	—	—	—	—	—	—
Didsbury	—	—	—	1	—	1	1	81	—	—	81	—	—	—	—	—	—
Ardwick	231	88	60	38	68	13	24	454	14	—	455	10	15	141	18	56	—
TOTALS	1,461	685	1,053	1,848	508	1,551	1,602	8,955	98	—	8,880	117	2,742	1,002	350	1,193	—

TABLE 3.

HOUSING AND TOWN PLANNING ACTS.

TABLE OF AVERAGES. HOUSES INSPECTED DURING THE YEARS 1923 AND 1924.

No. of Rooms per Tenement	No. of Individuals in Private Families or Tenements			No. of Individuals per Room			No. of Children under 10 years per Family or Tenement			Over 2 Individuals per Room		
	Families or Tenements	Population	Individuals per Family or Tenement	Rooms	Population	Individuals per Room	Families or Tenements	Children under 10 years	Children per Family or Tenement	Families or Tenements	Population	Individuals per Room
One	—	—	—	—	—	—	—	—	—	—	—	—
Two	241	610	2·53	482	610	1·26	241	227	·94	56	328	2·92
Three	1,016	4,198	4·13	3,048	4,198	1·37	1,016	963	·94	99	801	2·69
Four	4,099	18,162	4·43	16,396	18,162	1·1	4,099	3,966	·96	153	1,493	2·43
Five	2,085	10,207	4·89	10,425	10,207	·97	2,085	1,644	·78	25	303	2·42
Six	919	4,816	5·24	5,514	4,816	·87	919	704	·76	5	70	2·33
Seven	367	2,307	6·28	2,569	2,307	·89	367	396	1·07	12	194	2·3
Over Seven ..	326	2,455	7·53	—	—	—	326	328	1	—	—	—
TOTALS	9,053	42,755	4·72	38,434	40,300	1·04	9,053	8,228	·9	350	3,189	2·55

The following Table shows the results of Inspection of Houses reported to the Housing Sub-Committee as Unfit for Human Habitation during the Years—.

	1923	1924
Number of Dwelling-houses inspected for all purposes ..	52,813	43,511
,, considered by the District Inspector of Nuisances unfit for human habitation (houses certified) ..	44	15
,, of representations made by the Sanitary Superintendent under a Local Act	44	15
,, of Closing Orders made	44	3
,, of Dwelling-houses the consideration of which stand adjourned	—	12
,, put in a fit state for human habitation after Closing Order had been made	—	—

General character of defects stated to exist:—

	1923	1924
Ventilation defective	21	13
Light defective	13	6
Closet accommodation defective	29	14
External disrepair	36	12
Internal disrepair	36	12
Drainage defective	20	1
Dampness	19	9
Water supply defective	—	3
Dirty—always immediately cleansed	6	—
Arrangement for deposit of refuse defective	20	3
Yards require paving	22	7

The number of new houses certified between November 1st, 1923, and October 31st, 1924, was 725; during 1922-23 it was 187; 1921-1922 it was 139; and 165 in 1920-1921; 79 in 1919-1920, 8 in 1918-1919, 11 in 1917-1918, 19 in 1916-1917, 119 in 1915-1916, 410 in 1914-1915, 748 in 1914, 997 in 1913, and 1,072 in 1912.

In neighbouring areas 552 new houses were certified during 1924 against 667 in 1923, 677 in 1922, 592 in 1921, 214 in 1920, 29 in 1919, 0 in 1918, 8 in 1917, 52 in 1916, whilst in 1915 the number was 238.

The figures for 1923 and 1924 were—Salford 100 and 134, Stretford 250 and 365, Eccles 301 and 50, and Droylsden 16 and 3.

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* This does not include new houses under the Municipal Housing Schemes. Including these the total number erected during 1922 was 2,013, in 1923 it was 1,097, and in 1924 it was 1,406.

HOUSING, TOWN PLANNING, ETC., ACT, 1919—SECTION 28.

	During 1923	During 1924
Number of houses referred to this department	266	32
Number of houses repaired by this department	138	20
Number of houses repaired by owner under this department	387	156

MEDLOCK STREET INSANITARY AREA.

The late Medical Officer of Health (Dr. James Niven), had in the latter period of his office reported upon the Medlock Street district as one of the insanitary areas in the City. Active preparations for carrying out this work to a practical issue were in process when the present Medical Officer of Health entered upon his duties, and the necessary enquiry was held by the Ministry of Health in 1923. The subjoined extract from the evidence given by the Medical Officer of Health records the conditions which formed the main reasons for the action taken.

The Ministry of Health approved the action, and issued a confirming order.

Medlock Street area had already been declared to be an unhealthy area some months before I took up office, but since then I have independently considered the facts, and am satisfied that this area is properly described as unhealthy. My reasons for this opinion are as follows :—

(1) The density of the housing.

(2) The density of population.

(3) The mortality statistics as compared with those of the district of Hulme and with the whole City.

(4) The general arrangement of the houses.

(5) The structural and other defects existing in the houses.

(1) *Density of Housing.*

Number of houses 199, of which 3 are derelict.

Nett area equals 10,933 square yards, or 2·26 acres.

Houses per acre taken on net area of land so occupied is 101·55.

Gross area of scheme, including half frontage streets, equals 21,148 square yards, or 4·37 acres.

Houses per acre, taken on gross area of land so occupied, equals 52·97.

The Census returns show that in the district of Hulme, of which this forms part, there are 29·5 tenements per acre, and in Manchester as a whole 7·6 tenements per acre.

Death-rates in the Medlock Street Area of Hulme compared with the whole Area of Hulme and of the City for the Four Years 1919–1922.
The Rates for the Special Area are based on the Populations as enumerated on the Housing Index Cards.
The Rates for Hulme and the City are based on the Census Populations of 1921.

Death-rates	All Ages	0–5	5–15	15–25	25–40	45–65	65 —	Measles	Diphtheria	Whooping Cough	Diarrhœa	Influenza	Phthisis	Cancer	Nervous Diseases	Heart and Blood Vessel	Bronchitis	Pneumonia	Other Respiratory Diseases	Wasting Diseases	Digestive System	Urinary System	Congenital Defects	Violence
City	14·05	37·50	2·88	3·73	6·50	19·86	84·6	0·22	0·09	0·13	0·33	0·63	1·22	1·21	0·52	2·34	1·57	1·26	0·13	1·25	0·48	0·46	0·15	0·47
Hulme..	17·44	50·50	3·51	4·50	8·25	25·26	92·2	0·49	0·13	0·18	0·62	0·80	1·77	1·35	0·63	2·76	2·15	1·91	0·16	1·45	0·54	0·47	0·18	0·53
Medlock Street Area..	20·62	88·70	2·09	2·05	9·96	26·02	100·0	0·59	0·29	0·29	1·47	0·88	1·77	0·88	0·88	2·06	1·77	2·06	0·29	3·24	0·59	0·88	0·29	1·77
No. of deaths in Medlock Street Area ..	70	33	2	1	9	15	10	2	1	1	5	3	6	3	3	7	6	7	1	11	2	3	1	6

The recommendations of the Ministry in connection with assisted housing schemes limited the houses per gross acre to 12.

In the Medlock Street area therefore the houses are, including appropriate, street frontages, more than four times as numerous as the Ministry's standard and over one-and-a-half times as numerous as in the district of Hulme, where the area is located.

(2) *Density of Population.*

The total persons—862.

Number of persons per acre, including appropriate street frontages—196 approximately.

On the basis of the Ministerial recommendation of 12 houses per acre and an average of 4·5 persons per house, the density of population per acre should not exceed 54. We have therefore living on this area over 3½ times as many people as is considered the proper quota.

In the Hulme district the population averages 136 per acre—in the whole City it averages 34 persons per acre.

(3) *Mortality Statistics.*

The conclusions contained in this paragraph are based upon the mortality returns for the four years 1919-1922, as shown in the following table:—

(a) *At all Ages.*

City..	14·05 per 1,000.
Hulme	17·44 ,,
Medlock Street Area	20·62 ,,

In other words the mortality rate for Medlock Street area is 46·7 per cent. higher than for the whole City, and 24·1 per cent. higher than for the district of Hulme.

(b) *Age Incidence.*

The age incidence of the mortality rates shows that below the age of 5 years the death-rate in the area is 136·5 per cent. higher than for the whole City, and 75·6 per cent. higher than for the Hulme district.

(a) Deaths 0–5 years expressed as perceentage of total deaths in area:—

Medlock Street	47·1
Hulme	28·9
City	23

(b) Infant Mortality Rate:—

Medlock Street	192
Hulme	119
City..	97

These figures show most definitely the highly dangerous conditions to child life which exist in the Medlock Street area.

From the age of 25 years upwards the death-rates for Medlock Street area are again markedly higher than for the whole City and for Hulme district.

From 5–25 years the Medlock Street area death-rates are lower, but this is in itself evidence that it is the housing conditions that are inimical, as it is in these periods of life that individuals are mostly out of the housing environment at school and in the outdoor and other pursuits of adolescence.

(c) *Mortality Rates of certain Diseases.*

Of infantile conditions epidemic diarrhœa is five times, and wasting diseases nearly three times as fatal in this area as in the City generally. Diarrhœa is especially associated with bad environment.

Measles, whooping cough, phthisis, pneumonia, and other respiratory diseases all have a high incidence.

Sunlight and abundant fresh air are the most valuable aids in the modern treatment of these conditions.

The dense crowding of the houses unquestionably favours the onset of these diseases.

(4) *General Arrangement of Houses.*

The density of the housing has already been demonstrated. In addition to this the general planning of the area is bad. The houses are built in long continuous rows. The majority of the streets are very narrow.

The backs of the houses throughout look on to passages about three feet wide. The backyards are all small and confined by high walls or actually by buildings. The main streets are of better width, but there is no house in the area which is assured of adequate lighting front and back, nor does any one of the houses have an adequate circulation of air around it.

The absence of proper lighting and ventilation are in themselves sufficient to render the area an unhealthy one.

The remaining portion of the evidence of the Medical Officer of Health concerned detailed conditions of the individual houses.

EXTRACT FROM THE REPORT OF THE MARKETS COMMITTEE FOR THE YEAR ENDING MARCH 31ST, 1924.

(*a*) AMOUNT OF UNWHOLESOME FOOD CONDEMNED DURING THE YEARS ENDING 31ST MARCH, 1923 AND 1924.

Meat and Fish.

	1923–24	1922–23
	LBS.	LBS.
Beef	585,258	630,287
Mutton	21,097	18,948
Veal	13,941	13,371
Venison	449	148
Pork	102,124	62,638
Imported Offals	5,747	19,551
	728,616 = 325¼ tons	744,943 = 332½ tons
Fish	209,652	238,136
Shellfish	36,723	61,399
	246,375 = 110 tons	299,535 = 133¾ tons

Other Food Stuffs.

	1923–24	1922–23
Game (Head)	386	78
Poultry (Head)	6,192	4,332
Rabbits (Head)	19,021	13,842
Fruit (lbs.)	138,328	123,897
	= 61¾ tons	= 55¼ tons
Vegetables (lbs.)	144,845	184,408
	= 64½ tons	= 82¼ tons
Miscellaneous :—		
Eggs (Number)	29,922	34,001
Condensed Milk (lbs.)	6,261	16,183
Sundry Provisions (lbs.)	9,176	15,097

With the exception of the following, which were seized while deposited or exposed for the purpose of sale, the above quantities were surrendered after being condemned by the Inspectors of the Department.

	1923–24	1922–23
	LBS.	LBS.
Meat	454½	156¾
Fish	27	239½
Fruit	—	139½
Condensed Milk	—	192
Syrup	—	10
	HEAD	HEAD.
Rabbits	—	29
Fowl	3	—
Eggs	25	—

NOTE.—The term " surrendered " includes cases in which the Inspectors have discovered the diseased meat, etc., in the course of their duty, but in which, owing to saleman's acceptance of Inspector's decision, it has been deemed unnecessary to obtain Magistrate's order prior to destruction.

PARTICULARS RELATING TO THE OPERATIONS OF THE CLEANSING DEPARTMENT.

The Medical Officer of Health is indebted to Mr. Williamson, Superintendent of the Cleansing Department, for the following particulars relating to the operations of the Cleansing Department during the year ending 31st March, 1924.

Cleansing Department,
Town Hall, Manchester.

Dear Sir,

The administration of the Cleansing Department of the City of Manchester is under the supervision of a Superintendent, with a staff of about 50 officials and about 1,750 workmen.

The extent of the Department's operations may be gathered from the following general statistics:—

The gross expenditure of the Department during the year ended March 31st, 1924, was £395,796, and the gross income £87,275, the net cost being £308,521.

The wages of the Department for the year amounted to £259,488, including bonus.

For Departmental purposes the Cleansing of the City is divided into a Nightsoil Section and a Scavenging Section.

The work of the Nightsoil Section includes the emptying of old privies and pail closets and the collection and disposal of household refuse; whilst the Scavenging Section deals principally with the cleansing of the streets and disposal of refuse collected therefrom.

Nightsoil Section.

There are within the City 161,134 dwelling-houses, 4,511 lock-up shops, and 4,004 workshops. From these premises during the past year there was collected and disposed of 191,497 tons of ashes, 5,819 tons of nightsoil and pail contents, 18,876 tons of warehouse and trade refuse, 4,595 tons of slaughter-house refuse, 3,415 tons of stable manure, and 1,928 tons of fish refuse.

Previous to 1872 the midden-privy system was in operation, but the Corporation then decided upon the introduction of what is known as the pail-closet system, the scarcity of water preventing the adopting of the water-carriage method. Since the water difficulty has been solved, the conversion of pail-closets into water-closets has been proceeded with, and is rapidly nearing completion. There are now only 217 privies and 1,244 pail-closets within the City.

In later years it was decided to replace the wooden ash-boxes by galvanized iron receptacles with lids, and there are now 168,905 of the latter; the number of wooden ash-boxes being reduced to 1,140.

TABLE SHOWING NUMBERS OF PRIVIES, PAILS, ASH-BOXES, AND ASH-BINS FOR PERIOD 1911-1924.

Year	No. of Privies (with Ashpits)	No. of Pails	No. of Wooden Ash-boxes	No. of Galvanized Iron Ash-bins with Lids
1911	5,218	15,624	56,494	74,494
1912	1,982	10,000	50,421	88,762
1913	292	3,850	41,645	101,239
1914	218	2,128	31,875	112,843
1915	157	1,710	24,677	121,191
1916*	236	1,671	16,653	142,107
1917	230	1,665	12,469	146,246
1918	230	1,633	11,230	147,616
1919	217	1,327	8,011	151,609
1920	217	1,326	4,827	153,962
1921	217	1,322	2,181	156,587
1922	217	1,310	1,681	160,347
1923	217	1,300	1,440	165,165
1924	217	1,244	1,140	168,905

* District of Withington incorporated.

The removal of domestic refuse takes place once a week.

The fleet of barges for removal of refuse is now 11, and 2 additional are on the point of being purchased.

Five motor and 57 horse-sweeping machines are employed on the streets in 1924, a total of 106,865 tons of sweepings, litter, etc., being collected as compared with 98,952 tons in 1923.

The receipts from mortar mills in 1923–1924 was £4,353, compared with £4,639 in the previous year.

General.

The total weight of material dealt with by the Nightsoil and Scavenging Sections of the Department during the year was 344,378 tons, being equal to over 1,000 tons per working day.

TABLE SHOWING THE DISPOSAL OF MATERIAL COLLECTED TWELVE MONTHS ENDING MARCH, 1924.

	Tons	Tons
Town's Refuse to Department's Estates	9,126	
” „ Farmers	145	
” „ (Pail contents) to Farmers	546	
		9,817
Garbage to Department's Estates	2,282	
Stable Manure to Department's Estates	2,930	
” Farmers	51	
		5,263
Clinkers to Department's Estates	4,985	
” „ Contractors	2,960	
” „ Allotments	—	
” and Rubbish to Tip	74,698	
		82,643
Sweepings to Estates	17,129	
” „ Farmers	2,426	
” (rough) to Tips	46,256	
” to Allotments	1,288	
		67,099
Rubbish (Ash-box Refuse) to Estates		37,866
Market Garbage to Farmers' Carts		516
Concentrated Manure		550
Sand on Streets		2,805
Stone Clippings on Wood Pavements		912
Mortar		8,241
Old Irons and Tins, Glass, Soap, Grease, and Waste Paper		1,361
Burning and Drainage		126,70
Total		344,378

The amount of refuse taken to the Carrington and Chat Moss Estates since they were purchased by the Corporation is as follows :—

Chat Moss Estate	1,333,286	tons in	26	years.
Carrington ,, ...	1,050,712	,,	36	,,

The number of farm tenants on these estates is 54, occupying 51 farmsteads and 3 extensive nurseries.

The Corporation erected the farmsteads, together with an adequate supply of town's water. The market value of the estates has considerably increased since their purchase, chiefly through cultivation and owing to the proximity of the Manchester Ship Canal.

I remain,
Yours faithfully,
R. Williamson,
Superintendent.

Dr. R. Veitch Clark,
Medical Officer of Health,
Manchester.

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